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Citation for published version:

Maternowska, C, Potts, A, Fry, D & Casey, T 2018, *Research that Drives Change: Conceptualizing and Conducting Nationally Led Violence Prevention Research*. UNICEF Office of Research, Innocenti, Florence.
<<https://www.unicef-irc.org/publications/991-drivers-of-violence-national-research.html>>

Link:

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Document Version:

Publisher's PDF, also known as Version of record

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Research that Drives Change: Conceptualizing and Conducting Nationally Led Violence Prevention Research

M. Catherine Maternowska, Alina Potts,
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October 2018



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The Office of Research – Innocenti receives financial support from the Government of Italy, while funding for specific projects is also provided by other governments, international institutions and private sources, including UNICEF National Committees.

This report has been peer reviewed both externally and within UNICEF.

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For readers wishing to cite this document, we suggest the following form:
Maternowska, M.C., Potts, A., Fry, D. and Casey, T (2018). *Research that Drives Change: Conceptualizing and Conducting Nationally Led Violence Prevention Research Synthesis Report of the “Multi-Country Study on the Drivers of Violence Affecting Children” in Italy, Peru, Viet Nam and Zimbabwe*. UNICEF Office of Research – Innocenti, Florence (2018).

United Nations Children’s Fund (UNICEF)

October 2018

Illustrations from the video *The Multi Country Study on the Drivers of Violence Affecting Children* by Jessica Tan www.jessicatan.com
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Research that Drives Change: Conceptualizing and Conducting Nationally Led Violence Prevention Research

Synthesis Report of the “Multi-Country Study on the Drivers of Violence Affecting Children” in Italy, Peru, Viet Nam and Zimbabwe

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ACKNOWLEDGEMENTS

We would like to express profound thanks to all of our country partners, their national steering committees, and the Global Advisory Board for their tireless efforts and commitment to the process over the years. A special note of thanks to the Representatives and Deputy Representatives of UNICEF Country Offices and the Child Protection Regional Advisors – all of whom supported this work.

A special and significant thanks to Helen Epstein, Visiting Professor of Human Rights and Global Public Health at Bard College, who traveled to two of the four study sites (Viet Nam and Italy) and conducted key informant interviews. Helen also carved and crafted all four national reports, bringing national narratives alive and ultimately creating the basis of the national reports for which we are grateful.

We are also grateful for all reviewers and other contributors for their valuable insights and comments to improve the quality of this report.

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- UNICEF
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- UNICEF Zimbabwe
- Women’s University of Africa
- Africa University
- Childline
- Africa Community Publishing Development

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- Oxford University
- GRADE (Peru)
- Viet Nam Academy of Social Sciences
- Centre for Economic and Social Studies (CESS), Hyderabad
- Sri Padmavati Mahila Visvavidyalayam (Women’s University) (SPMVV), Tirupati (India)
- Ethiopian Development Research Institute

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EXECUTIVE SUMMARY

Globally, studies have demonstrated that children in every society are affected by physical, sexual and emotional violence. The drive to both quantify and qualify violence through data and research has been powerful: discourse among policy makers is shifting from “this does not happen here” to “what is driving this?” and “how can we address it?” To help answer these questions, the *Multi-Country Study on the Drivers of Violence Affecting Children* – conducted in Italy, Viet Nam, Peru and Zimbabwe – sought to disentangle the complex and often interrelated underlying causes of violence affecting children (VAC) in these four countries.

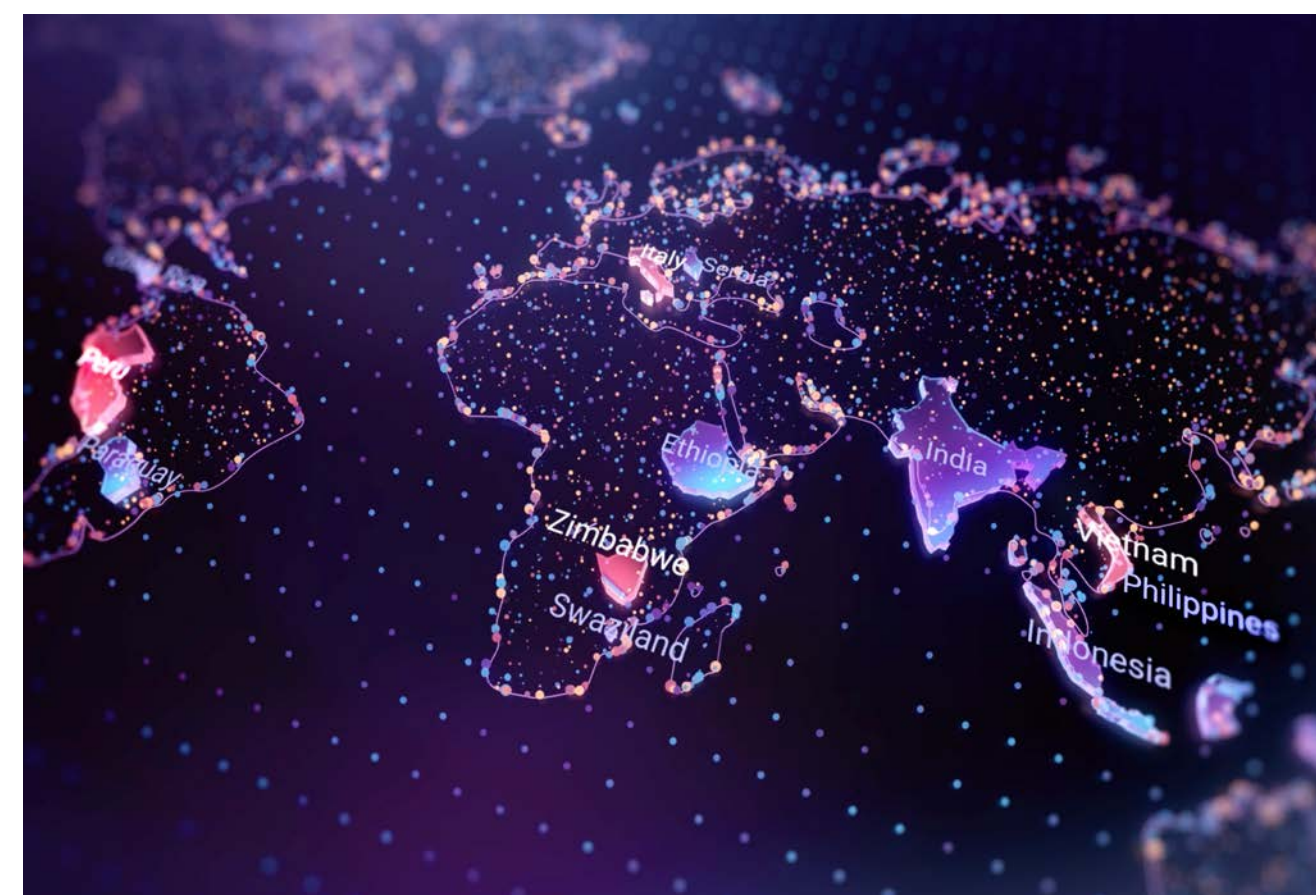
Led by the UNICEF Office of Research – Innocenti with its academic partner, the University of Edinburgh, the Study was conducted by national research teams comprised of government, practitioners and academic researchers in each of the four countries. Drawing on human-centred principles, the Study used an iterative approach which put national ownership and co-creation at its core. Government partners were actively engaged as co-researchers and all data analysis was conducted in-country by government statisticians. Facilitating and prioritizing national meaning-making through dialogue and joint analysis and synthesis of findings was also a key part of the Study design.

Each national team used a common process involving three separate components, all of which build on *existing data and research*: a systematic literature review of academic and ‘grey’ literature (such as research reports) including both quality quantitative and qualitative research, secondary analyses of nationally representative data sets and an initial mapping of the interventions landscape. Analysed together, these sources of information helped build initial hypotheses around what drives violence in each country.

Two key frameworks were applied to the analysis in this Study: 1) a version of the socio-ecological model, which helps to understand the dynamic relationships between factors at the micro-, meso- and macro-levels, and 2) an age and gender framework, which recognizes that a child’s vulnerability and ability to protect herself from violence changes over time with her evolving capacities. Through these lenses, common themes emerged across contexts. Guided by findings from the four countries highlighting the dynamic and constantly changing and/or overlapping domains that shape violence in children’s lives, this Study moved beyond understanding the risk and protective factors for violence affecting children, which are often measured at the individual, interpersonal and community level. In doing so, it demonstrated how patterns of interpersonal violence are intimately connected to larger structural and institutional factors—or the *drivers of violence*.

The structural drivers of violence identified across the four country sites, representing high (Italy), upper middle (Peru), lower middle (Viet Nam) and low income (Zimbabwe) settings, include: rapid socio-economic transformations accompanied by economic growth but also instability; poverty; migration; and gender inequality. The institutional drivers of violence, such as legal structures, ineffective child protection systems, weak school governance and harmful social and cultural norms, often serve to reinforce children’s vulnerabilities.

Drivers are rarely isolated factors and tend to work in potent combination with other factors within a single level as well as between levels of the social ecology that shapes children’s lives. While some drivers can lead to positive change for children, in this study, these factors or combinations of factors are most often invisible forms of harm in and of themselves.



While VAC is present in every country, the analyses also show how violence conspires unevenly to create and maintain inequalities between and within countries. The institutions and communities upon which children and their families depend are changing social entities with many interdependent parts. The type of violence in any one or multiple settings may vary depending on a variety of risk or protective factors and/or by age and gender.

One of the most important findings is that violence is a fluid and shifting phenomenon in children’s lives as they move between the places where they live, play, sleep and learn. Identifying and addressing unequal power dynamics – wherever they may occur in the home, school or community – is of central importance to effective violence prevention. The research also shows how behaviours around violence are passed through generations, suggesting that the social tolerance of these behaviours is learned in childhood. Data across countries also shows how violence is intimately connected to how relationships are structured and defined by power dynamics within and among families, peers and communities.

These findings, along with learning from the study process, led to the development of a new child-centred and integrated framework, which proposes a process by which interdisciplinary coalitions of researchers, practitioners and policymakers can understand violence affecting children and what can be done to prevent it. Using data to drive change, our proposed Child-Centred and Integrated Framework for Violence Prevention serves to situate national findings according to a child’s social ecology, making clear how institutional and structural drivers and risk/protective factors together shape the many risks and opportunities of childhood around the world.

KEY POINTS:

- Unpacking the drivers of violence at the structural and institutional levels, and analysing how these interact with risk and protective factors at the community, interpersonal and individual levels is critical to understanding how violence affects children. It is this *interaction* between drivers and risk/protective factors that delineates how, where, when and why violence occurs in children's lives.
- Focusing solely on the types of violence and the places where it occurs – as is commonly done in large-scale surveys and some qualitative studies – will only provide part of the picture of a child's risk of violence.
- The role of age and gender as childhood unfolds over time is also essential to understanding violence.
- Qualitative inquiry and analysis should be further promoted within the field of violence prevention – on its own or as part of a mixed-methods approach – to ensure meaningful data interpretation of the social world, including the webs of interactions and the concepts and behaviours of people within it.
- Research that engages and empowers stakeholders can contribute to a common strategy for building and sustaining political will to end violence affecting children.
- The way the study was conducted – led by national teams and using existing literature and data – provided a relatively low-cost and human-centred alternative model to costly surveys that assess the scope of violence without examining the drivers that determine it.
- Moving forward, violence prevention research should continuously and critically examine the ways in which we count and construct the complex social phenomenon of violence affecting children: placing recognition of process and power at the heart of our research endeavours.

1. MAKING VIOLENCE VISIBLE: AN INTRODUCTION TO KEY STUDY CONTEXT AND CONCEPTS

Over the past 10 years, studies around the globe have conclusively established that physical, sexual and emotional violence affecting children (VAC) is prevalent in every society, often at alarming levels (Hillis et al., 2016; UNICEF, 2017; Pinheiro, 2006; CDC).¹ Evidence shows that violence is perpetrated in all contexts where children live – in their households, in schools, in care and justice systems, in workplaces, and in neighbourhoods and surrounding communities. The drive to both quantify and qualify violence through data and research has been powerful: discourse among policy makers is shifting from “this does not happen here” to “what is driving this?” and “how can we address it?”

Globally, a public health approach is often taken in researching violence with the aim of establishing ‘risk’ and ‘protective’ factors to guide policies and programmes aimed at preventing and responding to the violence children face. Describing and counting those affected in this way makes violence visible and can help identify why some children are more vulnerable to experiencing and/or perpetrating it than others. Similarly, such analyses may shed light on our understanding of the places in which violence occurs—such as a child’s home, school or community. A child’s risk of violence also depends on the nature of their relationships and the setting in which these relationships operate. Our work on the scope of violence, by type and place, contributes to this fundamental body of research.

Our analysis, however, moves beyond understanding the risk and protective factors for VAC to demonstrate how patterns of interpersonal violence are, in fact, intimately connected to larger structural and institutional factors—referred to here as the ‘drivers of violence’. The approach adds to a growing body of literature that challenges child protection narratives focused on risk and protective factors, which tend to obscure the social ecology and structural determinants underlying the harms children may experience (Featherstone et al., 2016; Kumar et al., 2017).² By grounding context-specific understandings of risk and protective factors within the larger institutional and structural environments in which they manifest, the *Multi-Country Study on the Drivers of Violence Affecting Children* (henceforth ‘the Study’) proposes a new process by which interdisciplinary coalitions of researchers, practitioners and policymakers can understand violence affecting children and what can be done to prevent it.

1 Hillis S, et al., ‘Global prevalence of past-year violence against children: a systematic review and minimum estimates’, *Pediatrics*, vol. 137, no. 3, 2016, pp. 1–13.
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Pinheiro P. S., *World report on violence against children, United Nations Secretary-General’s study on violence against children*, United Nations, Geneva, 2006.
United States Centers for Disease Control and Prevention (CDC), Division of Violence Prevention. VACS Reports and Publications. www.cdc.gov/violenceprevention/vacs/publications.html (accessed 5 September 2016).
2 Featherstone et al., ‘Let’s stop feeding the risk monster: Towards a social model of ‘child protection’’, *European Journal of Politics and Gender*, vol. 7, no. 1, 2018, www.ingentaconnect.com/content/tpp/frs/pre-prints/content-pp_frs-d-15-00034r2
Kumar et al., ‘Ending violence in childhood: a global imperative’, *Psychology Health & Medicine*, vol. 22, Issue sup1: Know Violence in Childhood Global Learning Initiative: Dedicated to the memory of Peter Bell, March 2017, www.tandfonline.com/doi/abs/10.1080/13548506.2017.1287409

The settings and context

The findings begin to explain how and why violence affects children around the world, drawing on four countries with diverse histories, economies and cultures: Italy, Peru, Viet Nam and Zimbabwe. The selection of these countries was purposive. The countries chosen represented different areas of the world – Southern Europe, South America, Southeast Asia and Southern Africa – as well as different income levels. This Study relied exclusively on existing data – making sense of quantitative data without reinvestment in new surveys – thus each country included had nationally representative data on VAC and a UNICEF Country Office ready and eager to support a nationally led research process.³ What follows is a brief overview of each national context (*see Table 1*).

Table 1. Demographic information for each country in the Study

	Italy	Peru	Viet Nam	Zimbabwe
Region	Europe	Latin America	East Asia	Southern Africa
Income level	High	Upper middle	Lower middle	Low
Total population (2017)	60,589,445	32,165,485	95,540,800	16,529,904
Percentage of population aged 0–18 years	17.4% (2016)	32.6% (2012)	29.8% (2016)	39.2% (2012)
Percentage of population living under the national poverty line	7.9% (2016)	20.7% (2016)	9.8% (2016)	72.3% (2011)
Urban population (% of total, 2017)	69.3%	79.2%	34.9%	32.2%

All data are from the World Bank; Child population is from UNICEF Statistics; Poverty data from Italy is from Istat and refers to the incidence of absolute poverty among the population

Italy is the study’s only high income country site. Throughout the twentieth century and up to the present day, Italy has been at the vanguard of policymaking for children, from the legendary early childhood education programmes developed after World War II in Reggio Emilia to ongoing efforts to adhere to the provisions in the Convention on the Rights of the Child, which Italy was among the very first countries in the world to ratify in 1991. As with much of Southern Europe, Italy is experiencing a rapidly changing socio-economic landscape; the country currently faces economic and political ‘crises’ as well as a number of people reaching Europe through its shores.⁴ According to Istat (2014) data, poverty and social exclusion have greatly increased and the social protection system is not able to respond effectively to the needs of Italy’s most vulnerable people due to its fragmentation. The implications of this affect both children born in Italy and those arriving from other countries.

Peru has enjoyed relative and rapid economic growth since the mid-1980s. As a middle income country, Peru has for decades been one of Latin America’s most open economies with Peruvians overall benefitting from economic growth. According to government statistics, less than a third of the Peruvian population now lives below the national poverty line, compared with around half in the

3 For a full ‘readiness assessment’ checklist, see page six of our Step-by-Step Guide for conducting the research: www.unicef-irc.org/research/pdf/440-TOOLKITstep-by-step_28Sept2016_OK.pdf
4 www.theguardian.com/world/2016/nov/28/2016-sets-new-record-for-asylum-seekers-reaching-italy-by-boat

early 2000s. Yet inequality persists, with poverty and child malnutrition disproportionately affecting indigenous children – especially those from rural Andes and Amazonia regions – impacting their educational outcomes and livelihood opportunities (UNICEF, 2010). Approximately a third of Peru’s 30 million inhabitants are under 18 years of age; rapid urbanization and changing norms linked to both geographical and social mobility have challenged the functioning of largely informal protection provided to children through extended families. Many formal services fail to address the needs of Peru’s culturally diverse population. Meanwhile, the support of international donors and agencies has been reduced as a result of its current economic status.

As the study’s lower middle income country, **Viet Nam** is considered by the World Bank to be a development success story having benefited from political and economic reforms known as ‘Doi Moi’, or renovation, in the mid-1980s. The effects of Doi Moi were not only economic; it also opened up the country to new ideas and attitudes. Traditional values have shifted, including concepts of gender. The interplay of economic, political and religious shifts and how these have influenced family values and aspirations provides a complex and dynamic background to understanding violence prevention and response in this Asian setting. New laws on gender equality, stronger sanctions against domestic violence and the expansion of education and employment for women have contributed to changes in the nature and constellation of the Vietnamese family, including an increase in the number of female-headed households.⁵ The implications of these changes for children’s well-being are only beginning to surface.

Zimbabwe, the study’s low income country setting, had one of the most well-developed social protection systems in Africa before the millennium (Kambarami, 2006), when the human devastation wrought by HIV/AIDS – including children left without parents and/or burdened with childcare, alongside elders – as well as the effects of structural adjustment and a contentious redistribution of land ownership over the preceding decades led to total economic meltdown. The impact on the Zimbabwean household has been devastating. Serious economic decline continued throughout the 2000s, with per capita income reducing by almost 40 per cent (calculated from IMF, 2014). Health, education and water and sanitation services were unfunded, while nearly half of the population required food assistance. Zimbabwe’s current population is just over 13 million people (ZIMSTAT, 2012), almost two thirds in rural areas (World Bank, 2015); however, this is rapidly changing as rural-urban and cross-border migration increases due to the search for better livelihoods (Bray & Dawes, 2016). Zimbabweans exhibit remarkable resilience to cope, yet prolonged economic fragility and political unpredictability has taken its toll on the country’s capacity to deliver, particularly for its children.

Each country’s specific political, economic, cultural and historical context formed the backdrop for understanding how drivers manifest and interact with each other, as well as various risk and protective factors. The main focus of this Study is in exploring those interactions using a socio-ecological model and looking across the life course, as girls and boys age. We acknowledge that this work is both complex and ‘messy’, and emphasize that the regional variation in the four countries studied allows for rich analysis across a range of settings but does not necessarily allow for comparability or generalizability across regions or globally.

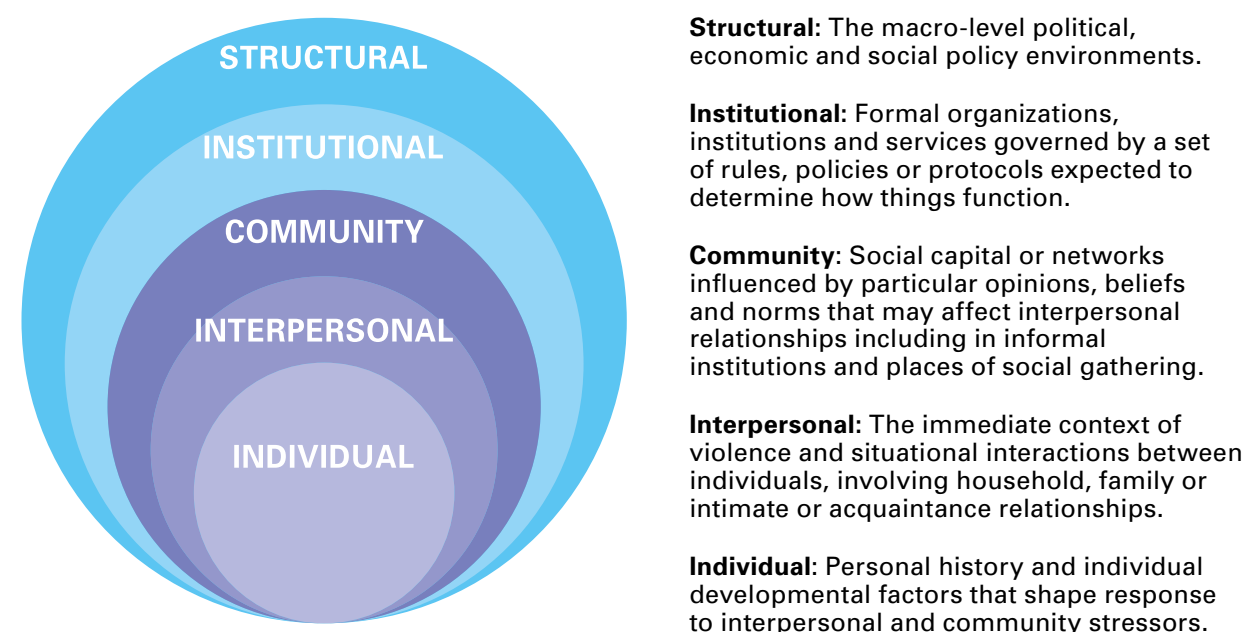
⁵ Viet Nam has a two-child policy with the official family size goal being *m t h o c h a i c o n*, which means “one or two children” (Goodkind, 1995). Fines and other sanctions are levied on families with three or more children.

Key frameworks: The socio-ecological model and age-gender timeline

As described above, this Study explores physical, emotional and sexual violence affecting children within national contexts. The analysis locates findings within the reality of children’s lives and recognizes that what happens in one area of a child’s life, such as in school, is often related to what happens in other areas where children live, play and sleep. Acknowledging the value of multiple types of data and knowledge while working closely with national teams of research practitioners, we set out to interrogate existing VAC data across four countries by asking the questions: ‘who’, ‘what’ and ‘where’?

To answer these questions, the Study draws on several important frameworks and analytical concepts. First, it recognizes that most violence affecting children occurs in families, communities and schools and is committed by people children know (Pinheiro, 2006). Further, it views VAC not merely as the interaction between a child and one or more other individuals, but as a socio-ecological phenomenon – one that is dynamic and complex, influenced by the interaction of macro-, meso- and micro-level factors and takes place within specific contexts. The diagram below (*see Figure 1*) illustrates these various socio-ecological levels of influence (Bronfenbrenner, 1979; Heise, 1998).

Figure 1: The Socio-Ecological Framework



The second critical concept employed by the study addresses age and gender (see Figure 2): how boys and girls grow and change as they move through childhood and into adolescence.⁶ Commonly referred to as the child's developmental life course, this concept emphasizes that a child's vulnerability and ability to protect herself from violence changes along with her evolving capacities over time (Lansdown, 2004; Chong, Hallman & Brady, 2006).⁷

Definitions of key

research terms used

Risk and protective factors within this social ecology and throughout the stages of a child's life are essential to understanding violence and ultimately creating better violence prevention policy and practice. Risk and protective factors are generally measured at the individual, interpersonal or community levels of the socio-ecological model.

Figure 2: Age and gender—Stages of adolescence (PAHO classification)ⁱ

It is important to recognize how girls and boys may develop differently, especially as they move through childhood and into adolescence. There is no global consensus around categorizing children's and young people's stages of life, and regional or subregional variations may also be expected. The timeline used here is based on a classification by the Pan American Health Organization (PAHO) to illustrate how boys and girls may proceed through the stages of adolescence at different times.

ⁱ Breinbauer and Maddaleno, 2005; McCarthy, Brady and Hallman, 2016.

GIRLS	Age	BOYS
	9	
PRE-ADOLESCENCE	10	
	11	PRE-ADOLESCENCE
	12	
EARLY ADOLESCENCE	13	
	14	EARLY ADOLESCENCE
MIDDLE ADOLESCENCE	15	
	16	MIDDLE ADOLESCENCE
LATE ADOLESCENCE	17	
	18	LATE ADOLESCENCE
	19	
YOUTH	20	YOUTH
	21	
	22	
YOUNG ADULTHOOD	23	YOUNG ADULTHOOD
	24	

A **risk factor** is anything that increases the probability that a young person will be a victim of physical, sexual or emotional violence (defined below). Risk factors are not the direct cause of violence but they contribute to violence (Mercy et al., 2002; DHSS, 2001). Risk factors for violence are not static: different factors may come into play at different points during childhood and adolescence, and may vary by gender (or other characteristics). Their predictive value changes depending on when they occur during the child's developmental life course and under what circumstances. Further, the same factor may constitute a risk during one stage of development but not another; it may even constitute a protective factor for some groups of children or in some circumstances (and vice versa).

Protective factors have the reverse effect: they enhance the likelihood of positive outcomes and lessen the likelihood of negative consequences from exposure to risk. Protective factors may be skills, strengths, resources, supports or coping strategies that a child has individually or in relation to her family, community or society. Protective factors reduce the risk of violence and are predictive of positive outcomes for children.⁸

In this Study, the term '**drivers**' refers to factors at the institutional and structural levels that create the conditions in which violence is more likely to occur. This is an important distinction: while risk and protective factors reflect the likelihood of violence occurring due to characteristics most often measured at the individual, interpersonal and community levels, the drivers refer to macro-level (structural) factors and meso-level (institutional) factors that influence a child's risk of, or protection from, violence.

To understand how violence manifests, it is necessary to study how numerous factors interact. Statisticians will often refer to **mediators** – or indirect effects – to explain the complicated relationship(s) between a given **predictor, cause or risk factor (x)** and an associated **outcome or effect (y)**. Work on violence prevention, particularly from scholars addressing violence against women, indicates that this model is insufficient. Our findings corroborate this: precise prediction is difficult for two reasons. First, what might be true in one context may not be so in another. Second, many interactions (between drivers and risk factors) may not be empirically observable. Simply put, very little about violence can be explained in a linear fashion.

To accommodate this complexity, we gathered, analysed and synthesized available existing data on violence prevention, engaging multi-disciplinary national teams to interpret the findings. The same teams analysed and interpreted their own data, thinking through the meaning of the findings within the configurations of contexts in which children live, learn and play. Entering into dialogue with each other allowed stakeholders to clarify their own understandings and ground their national findings with their contextual knowledge. Rather than focus on topical issues – such as child labour or sex trafficking – national teams were encouraged to step back and analyse what factors might be *driving* children into such unsafe conditions. Secondary analyses of surveys measuring the prevalence of violence in different settings were of some value, but ultimately, understanding how and when violence takes place requires more than what traditional surveys can offer. In each country, national teams drew on the findings from secondary analysis of existing, nationally representative data, together with the synthesis of smaller-scale quantitative and qualitative studies identified through a literature review. This yielded a deeper understanding of the processes and patterns of violence, the findings of which are presented here.

Definitions of violence, as explained below (see Challenges section) vary widely in the field of violence prevention. Overall however, we relied on the definitions generally focusing on the following types of violence (see Box 1).

⁶ This is not meant to exclude other gender identities.

⁷ Lansdown notes that the UN Convention on the Rights of the Child provides a principled framework for promoting this process.

⁸ www.cdc.gov/violenceprevention/youthviolence/riskprotectivefactors.html

Box 1. Definitions: Types of violence

Ultimately, all forms of abuse overlap, both in definition and in reality. Children who are abused in one way are often abused in others, both through separate acts and because suffering an act of sexual or physical abuse, for example, often leaves emotional scars as well. While ‘types’ of abuse are in reality hard to disentangle, these categories are useful for understanding and responding to the complex problem of violence affecting children.

The United Nations defines violence affecting children as “all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse” (Article 19, UNCRC, 1989). This report is aligned with this definition as well as those of the Centers for Disease Control. However, legal and cultural definitions of and responses to violence may vary between and within countries. The terms ‘violence’ and ‘abuse’ are used interchangeably in this report.

Child violence and abuse are considered acts of commission—that is, words or actions that cause harm, potential harm or threat of harm. Acts of commission are deliberate and intentional although harm might not be. For example, a caregiver might intend to hit a child as punishment, but not intend to cause a concussion. In this report, the following types of violence involve acts of commission:

- Physical violence or abuse resulting in actual or potential physical harm; for example, hitting, slapping, choking, cutting, shoving, burning, shooting or use of any weapons, acid attacks or any other act that results in pain, discomfort or injury.
- Sexual violence or abuse involving a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society. It may include: unwanted sexual comments or advances; attempts to traffic a person’s sexuality through the use of force, coercion or threats; and completed, threatened or attempted violence of a sexual nature including rape, sexual abuse and sexual exploitation.
- Emotional violence or psychological abuse meaning the failure to provide a developmentally appropriate, supportive environment, including the availability of a primary attachment figure, so that the child can develop a full range of emotional and social competencies commensurate with her potential in the context of her society. It includes acts that harm or threaten the child’s health or physical, mental, spiritual, moral or social development including restriction of movement, patterns of belittling and denigrating, scapegoating, threatening, scaring, discriminating, ridiculing or other non-physical forms of hostile or rejecting treatment.

Acts of omission are different than acts of commission. They refer to the failure to provide for a child’s basic physical, emotional or educational needs or to protect a child from harm or potential harm and are frequently referred to as different forms of neglect. Harm to a child might not be the intended consequence. The following types of maltreatment involve acts of omission: failure to provide medical or dental care, ensure school attendance, provide adequate supervision or prevent exposure to violence, as well as failure to address physical and emotional needs. The analysis in this report does not generally include neglect.

Other theoretical and conceptual frameworks

While the socio-ecological framework and age and gender life course provided the key conceptual models for organizing country data, the interpretation of the patterns emerging required further analysis and synthesis. To this end, the researchers drew on a variety of theoretical disciplines and conceptual frameworks to inform our understanding of what drives violence in Italy, Peru, Viet Nam and Zimbabwe.

The theories and perspectives helped situate the review, analysis and synthesis of the multi-country findings more effectively. The process included sorting through the meaning of **different types of violence** (emotional, physical and sexual) **happening in different places** (the home, school and community) **at different levels of a child’s social ecology** (structural, institutional, community, interpersonal and individual) while keeping issues of **age, gender and power relations figuring prominently** in our understanding. Within all these variables, it was also clear that the **dynamics of children’s lives** (that is, that they are changing and growing) made the task at hand even more challenging. The variables that might predispose a child to a violent or violence-free life appear to move in multiple and often shifting directions across time.

Here we briefly review some of the more significant theories, ideas and concepts that informed our collective interpretation in addition to the age/gender timeline and Bronfenbrenner’s elaboration of the socio-ecological model.

These frameworks and ideas were:

- Complexity science
- Intersectionality
- Realist review methodology
- Social determinants of health
- Feminist theory
- Social norms theory

Complexity science is concerned with complex systems and problems that are dynamic, unpredictable and multi-dimensional, consisting of a collection of interconnected relationships and parts. Unlike traditional “cause and effect” thinking, complexity science is characterized by non-linearity. According to Miles (2009),⁹ complex systems and problems require more than simplistic linear thinking. With a complexity science perspective, there is an appreciation of the complex, dynamic and interconnected relationships occurring within a complex system or problem. Considering the public and population health issues of violence affecting children, there are a multitude of factors – drivers and risk factors – as well as relationships that contribute to the problem. Therefore, a corresponding intervention requires an approach that can account for the complexity of the issue. The basic premise of this emerging field of public health science argues that practitioners can be more effective if they understand the complex relationships that are occurring, rather than reducing problems to their smaller parts (Miles, 2009). Complexity science formed the basis of our analysis.

⁹ Miles, A., ‘Complexity in medicine and healthcare: People and systems, theory and practice’, *Journal of Evaluation in Clinical Practice*, vol. 15, 2009, pp. 409–410.

The idea of **intersectionality** was first forwarded in 1989 by an American civil rights advocate and leading scholar, Kimberlé Crenshaw: “Intersectionality simply came from the idea that if you’re standing in the path of multiple forms of exclusion, you are likely to get hit by both.”¹⁰ Intersectional theory is the study of how overlapping or *intersecting* social identities, particularly *minority* identities, relate to systems and structures of oppression, domination or discrimination. The theory, which has its roots in black feminism, explores how oppression operates on internalized, interpersonal, institutional and structural levels. With care not to detach or misappropriate it from its original context, we found intersectionality useful in shedding light on the overlapping of social identities that may make an individual child or group more likely to experience violence, as well as a helpful construct with which to consider how institutions often unknowingly exclude or privilege certain groups over others.

Intersectionality has found increasing space in the fields of women’s health and public health because it so effectively addresses societies’ inequalities, including the complex ways in which the drivers or determinants of health or related social phenomena in society intersect and mutually reinforce one another.^{11,12} Collins and Blige (2016), also working from a public health perspective, describe intersectionality as

...a way of understanding and analyzing complexity in the world, in people, and in human experiences. The events and conditions of social and political life and the self can seldom be understood as shaped by one factor. They are shaped by many factors in diverse and mutually influencing ways. When it comes to social inequality, people’s lives and the organization of power in a given society are better understood as being shaped not by a single axis of social division, be it race or gender or class, but by many axes that work together and influence each other. Intersectionality as an analytic tool gives people better access to the complexity of the world and of themselves... (p. 2)

To assist in understanding the importance of context in children’s lives, we also drew on the **realist review methodology**. Though originally designed for evaluating interventions, aspects of this methodology helped give meaning to the analysis of literature gathered during the Study. Realist review focuses on understanding and unpacking the mechanisms by which an intervention works (or fails to work), thereby providing an explanation, as opposed to a judgment, about how it works. The realist approach is fundamentally concerned with theory development and refinement—a task this Study sought to achieve. Most appealing about this approach is that it accounts for context as well as outcomes, which we applied to the process of systematically and transparently synthesizing relevant literature. Given the complex, multifaceted nature of data, strategies and interventions used to both explain and promote violence prevention and the limited understanding of the mechanisms of action that drive violence, the realist approach helped frame some of our thinking around the difference between drivers (which create the context) and risk and protective factors (which can enhance a child’s likelihood of experiencing or being protected from violence). A realist approach helps provide the policy and practice community with the kind of rich, detailed and highly practical understanding of complex social interventions which in turn are likely to be of much more use when planning and implementing programmes at a national, regional or local level.

10 www.movetoendviolence.org/resources/using-an-intersectional-approach/

11 Hankivsky, O. and A. Christoffersen, ‘Intersectionality and the determinants of health: a Canadian perspective’, *Critical Public Health*, vol. 18, Issue 3, 2008, pp. 271–283.

12 Weber, L. and D. Parra-Medina, ‘Intersectionality and women’s health: charting a path to eliminating health disparities’, in *Gender Perspectives on Health and Medicine (Advances in Gender Research, Volume 7)*, edited by Segal, M.T., Demos, V., Kronenfeld, Emerald Group Publishing, Bingley, UK, 2003, pp. 181–230.

The World Health Organization’s Commission on the **Social Determinants of Health (SDH)** has defined SDH as “the conditions in which people are born, grow, live, work and age” and “the fundamental drivers of these conditions.” The term ‘social determinants’ often evokes factors such as features of neighbourhoods (e.g., common areas and accessibility to services or safe places), which can influence violence-related behaviours. A large and compelling body of evidence has accumulated, particularly during the last two decades, that reveals a powerful role for social factors in shaping health across a wide range of health indicators, settings and populations.^{13,14,15} This evidence does not deny that medical care influences health; rather, it indicates that medical care is not the only influence on health. In the same way, there are multiple factors influencing violence against children, particularly in determining who is at risk of violence in the first place. The relationship between social factors and violence is not simple and there are active controversies regarding the strength of the evidence supporting a causal role of some social factors.

Our analysis was also informed by **feminist theory** and empirical research on violence against women, which was the first to plot violence data along the levels of the socio-ecological framework. Recognizing the need to integrate conceptual understandings of violence against children with that of violence against women (VAW), this body of work had a critical influence on our interpretation. The field of VAW makes a strong case for “interventions beyond the personal and interpersonal” when addressing violence (Lee et al., 2007; Heisie, 2016). In order to design interventions to address the drivers of violence, it is critical to understand how these systemic and structural disparities and oppressions interact to create the conditions in which violence is perpetrated.

Finally, our analysis was both informed by and can potentially inform **social norms theory**. Drawing on the work of Cristina Bicchieri, Gerry Mackie and Francesca Moneti, who have driven forward understanding of social norms in collaboration with the United Nations Children’s Fund (UNICEF),¹⁶ age and gender can add to the understanding of key concepts in current social norms research: for example, the importance of ‘reference groups’ – the people whose opinions and activities matter in convincing others to change behaviour and attitudes. Understanding the reference groups of 9–11 year olds could shed light on how to best design an intervention aimed at shifting adults’ and/or children’s perceptions about potentially harmful or helpful behaviours.¹⁷

13 Marmot, M., Bell, R., ‘Fair society, healthy lives’, *Public Health*, vol. 126(Suppl 1), 2012, S4–10. [[PubMed](#)]

14 Shonkoff, J.P., Phillips, D.A., eds, National Research Council and Institute of Medicine, *From neurons to neighborhoods: the science of early childhood development*, National Academy Press, Washington, 2000.

15 See also the report of an expert consultation hosted at UNICEF Office of Research—Innocenti in June 2012 on *The Structural Determinants of Child Well-being*, www.unicef-irc.org/publications/pdf/structural_determin_eng.pdf

16 See for example the Social Norms guides produced in collaboration with Cristina Bicchieri and Penn SoNG as part of this Study, for Zimbabwe and Swaziland (www.unicef-irc.org/research/pdf/429-Social-Norms-Manual-ESARO.pdf) and Viet Nam, Indonesia and the Philippines (www.unicef-irc.org/research/pdf/442-EAPROmanual04.pdf).

See also, UNICEF et al., *What are Social Norms? How are They Measured?*, UNICEF / University of California, San Diego, Center on Global Justice, 27 July 2015, www.unicef.org/protection/files/4_09_30_Whole_What_are_Social_Norms.pdf

17 Recent work by CARE, ‘Applying Theory to Practice: CARE’s Journey Piloting Social Norms Measures for Gender Programming’, describes how a small team across CARE has developed and piloted new measures for social norms through an iterative learning process across three pilot sites in Sri Lanka and Ethiopia started in 2014. The report may be especially useful for practitioners, and describes practical measurement tools developed such as the use of CARE’s Social Norms Analysis Plot (SNAP). <http://gender.care2share.wikispaces.net/file/view/care-social-norms-paper-web.pdf/612221613/care-social-norms-paper-web.pdf>

2. ORGANIZATION OF THE STUDY AND METHODS

Study governance and structure

The organization and oversight of the research relied on an Advisory Board whose members have carried out violence surveys, studies and or programming in a variety of settings in Europe, Asia, Africa and the Americas. The Advisory Board approved the study design, which included secondary data analysis of existing nationally representative data sets and a systematic review of all published articles and studies addressing violence. The details of both processes are described below.

A common methodological framework was designed for the study and was published to ensure integrity in the design across the four countries but also for other countries that have since adapted the same process (see the Step-by-Step Guide¹⁸). Each country followed the basic steps of the methodology, which included: first, identifying data sets and developing appropriate training in advanced statistical methods where required for the data analysis and interpretation; and second, identifying the international and national literature that met quality assurance requirements for the systematic review that followed. Quality assurance checks for both the secondary data analyses and the systematic reviews were a regular part of the process involving Innocenti research practitioners, the University of Edinburgh (as our main academic partner) and national reviewers, as required by our Advisory Board members (the quality assurance process is described further below and in the Step-by-Step Guide).

The cornerstone of this Study was the involvement of national steering groups in the research process to ensure ownership of – and ultimately accountability for – addressing violence issues with effective prevention programmes. While this process differed across countries, the lead government ministry was involved in each country’s steering committee and each of the groups met intermittently throughout the Study to review and provide feedback on findings. In this approach, the people involved in the process are as important as the actual data. A readiness checklist (see Figure 3) was designed which ensured national participation in every step of the study:

18 www.unicef-irc.org/research/pdf/440-TOOLKITstep-by-step_28Sept2016_OK.pdf

Figure 3: Readiness assessment, from ‘Understanding the Drivers of Violence: A Step-by-Step Guide to Conducting Preliminary Research around what Drives Violence’ (page 6)

READINESS FOR UNICEF COUNTRY OFFICES INCLUDES:

- Country Office (CO) Chief has secured ministerial partnership and has worked to establish a multi-sectoral ministerial steering committee. This is to be determined in writing with a list of steering committee members.
- A local, national scientific committee of key researchers and institutions within the country to provide context-specific input to the study stages should be initiated and names of key scientific focal points. These are to be identified through letters of interest in the Study in writing and national researchers’ CVs and writing samples secured.
- The proposed R3P Study and potential outputs should be discussed within National Action Plans for children and other key policies and priorities of the government and UNICEF to ensure that findings will be applied towards high-level impact. This is to be indicated in a letter of commitment from the lead Ministry overseeing the research.
- Access and permission to use national data and documents (questionnaires, reports, syntax and cleaned data) through proper ministry channels. This is to be provided with full letters of approval.
- Sufficient funding for all study components must be secured and planned for subsequently (costs can also be negotiated with UNICEF Office of Research – Innocenti if their engagement is requested). This is to be indicated in a budget of funds allocated with a porting of these for the national consultant and/or local research institute.
- All information needed by the international academic partner for contracting (including agreements from consultants for day rates, subcontracts, etc.) must be secured. It is recommended that academic partners be chosen for coordinating with the Office of Research.
- Secure high-level buy-in from one of the country’s most senior UN officials (the UNICEF Representative or Deputy Representative).
- Evidence of established relationships and connections related to the study with other sections within the UNICEF country office (Education, Health, Social Policy, etc.) to be provided, to enable cross-cutting outcomes.

As a result, all analyses and ultimately all documents generated were regularly reviewed by national committees whose members were from lead government ministries as well as the national academics. Because the UNICEF Country Office Senior Representatives or Deputy Representatives were well informed of the study protocol they, with the Child Protection Chiefs, ensured a regular national review process creating a second layer of accountability for the research design and outputs.

Making research human-centred

National steering committees reviewed emerging results and progress and engaged in action analysis—interrogating the strength of various findings and mapping the evidence against current national practice and policy priorities and actions. These discussions often revealed further (often hidden) evidence of additional national data, which was then analysed, quality-assessed and synthesized alongside other study findings (see Figure 4 for the iterative research process loops).

Frequently, statisticians were asked to re-run data or follow new lines of inquiry. The national steering committee also developed initial recommendations based on study findings that were further honed by additional review in various report iterations.

Figure 4. The iterative study process

AIM: internationally-facilitated, nationally-led research project taking a collaborative, action-oriented approach to tackling drivers of VAC.



The Study drew on human-centred design principles, taking an iterative approach to answering the main research questions: *What drives violence affecting children and what can be done about it?* Human-centred design has been defined as “a multi-stage problem-solving process that optimizes solutions based on users’ needs, behaviours, constraints, and operating contexts.”¹⁹ Examples of shared principles as applied to this study include: empowering government counterparts as co-researchers, not passive receptors for policy recommendations; collaborating with government statisticians to conduct secondary analyses in-country, not exporting the data or outsourcing data analysis to consultants; drawing on ethnography and other qualitative research; pausing to engage in meaning-making exercises at multiple stages of the research process; targeting specific messages within mixed audiences (aiming to avoid generic recommendations); and mostly, allowing for the time that co-creation requires.

¹⁹ Lee, Panthea, ‘Before the Backlash: Let’s Redefine Human-Centred Design’, 2015.

The human-centred design research process was not without its limitations, including a fairly constant need for capacity building training (not only in statistics but also in facilitation, interpretation of results and report writing). Delays in reporting were inevitable when relinquishing these processes to the national level. Nonetheless, involving national partners not as observers who sign off on the research results but rather as active agents in the research process was perhaps the singular most important aspect of this study. Countries discovered, on their own terms, that violence affecting children is not a technical problem—it requires social change that must be locally inspired and led. A UNICEF colleague puts it well:

The farther we are from problems affecting children... the more difficult it is for us to try to solve them. When you start shifting that paradigm and understanding your role is not to spit out solutions after solutions... [but that] your role is just to uncover the process and enable that process to happen... I think that first paradigm shift is very important and we need to own that.²⁰

As Sarah Cook from the UNICEF Office of Research – Innocenti wrote in the preface to *Social Realities of Knowledge for Development*²¹:

Paradoxically, however, greater acknowledgement of the social process involved in bridging gaps between knowledge producers and users is now often accompanied by a loss of social content in the forms of knowledge that are most highly valued as evidence. What constitutes good evidence has increasingly been defined by a particular set of claims to scientific rigour; methodological advances have moved the field towards clinical-style trials and quantitative experimental methods (although not without pushback), often accompanied by claims to value-free objectivity but at the expense of attention to messy, contested, complex social realities. [...] Above all... relationships of trust create the conditions within which evidence can inform and influence.²²

The impact of this ‘trust’, at least in one of the countries involved, is now well-established and documented (Morton and Casey, 2017²³) through the use of a “Contributions Analysis” (Morton, 2015²⁴).

Methods

The research involved three separate components: 1) a systematic literature review of peer-reviewed and published academic papers, also including a scoping of existing ‘grey literature’—written material (such as research reports and research briefing papers) often difficult to locate through conventional literature searches; 2) an initial mapping of the interventions landscape, particularly of evaluated prevention programmes; and 3) secondary analysis of existing data sets. Analysed together, these sources of information have helped build initial hypotheses around what drives violence in each country site. The goal was to utilize and explore *existing data* to better understand

20 Adler, Natalia, ‘DRP learning session on Human-Centred Design (PowerPoint-based webinar)’, 9 March 2016. Personal notes, www.yammer.com/unicef.org/#/files/53291485

21 Georgalakis, James et al., ‘The Social Realities of Knowledge for Development: Sharing Lessons of Improving Development Processes with Evidence’, Institute of Development Studies and the Impact Initiative, 2017, <https://opendocs.ids.ac.uk/opendocs/handle/123456789/12852>

22 See also Wessells et al., ‘How collaboration, early engagement and collective ownership increase research impact’, www.theimpactinitiative.net/impact-lab/collection/how-collaboration-early-engagement-and-collective-ownership-increase-research

23 Morton, S. and T. Casey, *Changing National Policy on Violence affecting Children: An impact assessment of UNICEF and partners’ Multi-Country Study on the Drivers of Violence affecting Children in Peru*, University of Edinburgh, Edinburgh, 2017.

24 Morton, S., ‘Progressing research impact assessment: A ‘contributions’ approach’, *Research Evaluation*, vol. 24, no. 4, 2015, pp. 405–419.

what creates the conditions under which violence occurs. The approach draws on aspects of a Realist Review process, a methodological approach that is geared towards exploring complex interventions (Greenhalgh et al., 2011, Pawson et al., 2005²⁵,²⁶ and see *Table A1, Annex A*).

Systematic literature review

A systematic literature review was conducted to identify studies reporting on the risk and protective factors of violence against children (emotional, physical and sexual abuse) in each of the four countries. Key English databases were searched (PubMed/Medline, PsycINFO (EBSCOhost), CINAHL-ebSCO, ERIC, EmBase Social Work Abstracts and SocIndex) and child protection experts and local databases in each country were also accessed to identify additional studies. The search employed a mix of both free text and controlled vocabulary of subject heading and keyword searches to identify articles via the electronic databases. To provide the broadest coverage of articles, the initial search term consisted of three components: population, type of violence and country name. An example of the keyword search is (‘child’ OR ‘childhood’ OR ‘children’ OR ‘adolescents’) AND (‘sexual abuse’ OR ‘physical abuse’ OR ‘emotional abuse’) AND (‘Italy’). These keyword searches were adapted by database and the included studies are presented in appendices in each country report (for links to individual country studies, see *Box 2; See also Annex C*).

Grey literature (e.g. informally published, in local or national languages) plays an important role in this Study because such perspectives on violence are often inaccessible or underutilized. Scholars and practitioners researching their own countries, producing quality university-level theses and dissertations and other studies, provide an important perspective on how violence operationalizes in particular cultural, historical, political and economic contexts. Thus, the grey literature search approach was determined by the local context. For example:

- In **Italy**, a systematic search of publications through the library at Istituto degli Innocenti – Italy’s largest library of research and studies on childhood – was undertaken.
- In **Zimbabwe**, a thorough search of local university databases and local community published materials was conducted.
- In **Viet Nam**, a researcher travelled to 20 locations, including various ministries and visits to NGOs and research institutes in Hanoi, as materials are often not archived in a central location.
- In **Peru**, researchers collated materials from a consortium of universities and also travelled outside Lima to five key regions identified by the steering committee, to ensure anthropological and other local literature was included alongside other grey literature (a particular strength of Peruvian research).

25 Greenhalgh et al., ‘Protocol - realist and meta-narrative evidence synthesis: Evolving Standards (RAMESES)’, *BMC Medical Research Methodology*, vol. 11, no. 115, 2011, www.biomedcentral.com/1471-2288/11/115

26 Pawson, R. et al., ‘Realist review – a new method of systematic review designed for complex policy interventions’, *Journal of Health Services Research & Policy*, vol. 10, Suppl 1, 2005, pp. 21–34.

Box 2. Country-specific outputs from the *Multi-Country Study on the Drivers of Violence Affecting Children*

Working in close collaboration with government and local stakeholders, this work was published by UNICEF Country offices and their partners in four (4) country focused reports:

- **Peru:** published in July 2016 with simultaneous posting of previously unreleased data on violence on the Ministry website: www.unicef.org/peru/spanish/resources_33614.htm
- **Zimbabwe:** published in October 2016 a three-part series on Childline (a secondary analysis we supported), which is setting standards in the use of administrative data for the region: www.unicef.org/zimbabwe/resources_18996.html
- **Viet Nam:** published a condensed version of the report in November 2016 at the HLM3 in Malaysia (for the full report, see: www.unicef-irc.org/files/upload/documents/MCSDV_Viet%20Nam_Understanding%20Drivers%20of%20VAC.PDF)
- **Italy:** published in November 2016 on the National Day of Sexual Exploitation https://www.istitutodeglinnocenti.it/sites/default/files/rapporto_ita_1_0.pdf (Italian report) ; https://www.istitutodeglinnocenti.it/sites/default/files/drivers_of_violence_italy_0.pdf (English report)

For a complete list of outputs, see Annex C and www.unicef-irc.org/research/pdf/447-UNICEF-Multi-Country-Study-Drivers-VAC_Outputs2.pdf

Studies were included in the broader search if: a) they were published in a scholarly peer-reviewed journal; b) they were published through 'grey literature' channels; c) they explored the drivers of violence against children (emotional, sexual and physical abuse) before 18 years of age, whether the participants were children or adults; d) they covered one or more aspects of drivers on different levels of the socio-ecological model (structural, institutional, community, interpersonal and individual levels); and e) they explored risk and protective factors for either perpetration or victimization. Studies were mostly primary research studies with the exception of administrative data reports or policy reports that included data not accessible elsewhere.

Quality assurance was fundamental to the process. All abstracts in English and local languages were examined by the national teams to determine whether they met the inclusion criteria developed for the study and eligible papers were examined in detail for key variables related to study design and findings. Where additional information was needed, the study authors were contacted directly. In addition, a quality assessment framework designed for the study was used to determine whether or not an article was included, based on an assessment of its quality across 17 domains. This quality assessment tool was based on previous tools utilized in studies exploring gender-based violence and violence against children and the guidelines for evaluating prevalence studies and qualitative studies. National teams were responsible for completing the quality assessment for all studies and a second reviewer from the international team checked 20 per cent of the articles. In cases of disagreement, the international reviewer conferred with the national researcher to reach consensus. Quality assurance checks were also carried out throughout each stage of the writing and editing process (the review protocol and step-by-step guide for the systematic review, including quality assessment domains, available here: www.unicef-irc.org/research/pdf/440-TOOLKITstep-by-step_28Sept2016_OK.pdf)

Because the study was inductive in its approach, the search for articles was broad and defined by socio-ecological categories (i.e. structural, institutional, community, interpersonal and individual) rather than specific drivers. This limitation was addressed by including a wide variety of key stakeholders from across the country in the national steering committees. National and technical steering committees were particularly helpful during the action analysis phase for both identifying and accessing national literature.

The systematic literature review of academic and grey literature identified a total of 554 studies that met the inclusion criteria outlined above (see *Annex A, Figure A1*). All studies are cited in each country report (see *Box 2*). Each study underwent a comprehensive data extraction process that included collecting information across 54 variables in four main areas: summary information, study information (including sample size, methods, etc.), ethical considerations and findings.

To synthesize the findings from the systematic literature review, national academic partners mapped their findings against the two frameworks for the study: the socio-ecological model and the age/gender matrix, both discussed in the Introduction section of this paper.

Secondary analyses

In addition to the systematic literature review and interventions mapping, a secondary analysis of existing national data sets (10 in total) was conducted (see *Table A2, Annex A*). These data sets differed in terms of the violence variables included and hence options for statistical analysis. The secondary analyses usually included calculating univariate statistics initially and then conducting bi- and multivariate tests to explore the relationship between violence experiences and potential 'drivers' variables, as well as exploring the frequency, severity and type of violence utilizing the software packages available to government statistics offices, namely SPSS and STATA. Hypotheses were drawn from the existing literature generated from the systematic review and explored using the study frameworks discussed earlier in this chapter. In other instances where little to no data existed on a specific risk or protective factor, more exploratory secondary analysis models were constructed and tested. The results were analysed alongside the findings from the literature review to generate a more nuanced understanding of the drivers, risk and protective factors. All analyses were conducted in-country by a national team with international technical assistance provided by the University of Edinburgh.

Each country brought to the analysis different data sets. In Italy, Vite in Bilico, conducted in 2006, interviewed women from ages 19 to 60 years about their experiences of violence in childhood in order to explore the associations with health and well-being outcomes in adulthood. In Peru, we worked from pilot data fielded in 2013; during the course of the study, the Ministry for Women and Vulnerable Populations (MIMP) and the National Institute for Statistics and Informatics (INEI) carried out a full survey called the National Survey on Social Relations (ENARES), a school-based survey which gathered nationally representative data from boys and girls aged 9–17 years about their experiences of violence. In Zimbabwe, we collaborated with ZIMSTAT, the national statistical agency, working from data collected in 2011, with the cooperation of the Centers for Disease Control and Prevention (CDC) and as part of a package of surveys being carried out with UNICEF and CDC throughout Eastern and Southern Africa. This study provided national population-based estimates on the magnitude and nature of violence among children. This National Baseline Survey on Life Experiences of Adolescents (NBSLEA), surveyed both adolescents and young adults (ages 13–24 years). In Viet Nam, we worked from two rounds of a national adolescent health survey, SAVY (Survey and Assessment of Vietnamese Youth) collected in 2003 and 2009 by the Government

Statistics Office (GSO) from a sample of 14–25 year olds. In addition, in Peru and Viet Nam, we drew on studies from Young Lives pro-poor national surveys completed with the same cohort for up to a decade or more.

The nationally representative data sets analysed in this study have important limitations in their design and administration that affect comparability and ultimately interpretation. First, data sets analysed from Italy were retrospective studies (*Vite in Bilico* and Istat’s violence against women study). Women up to 70 years old in Istat’s study (and age 60 in *Vite in Bilico*) were asked about their experiences of violence prior to the age of 16 years, introducing a strong potential for recall bias. This same risk of bias could also be present in the NBSLEA study in Zimbabwe, which asked 18–24 year olds about their experiences of violence before the age of 18. The remaining data sets from Peru, Zimbabwe and Viet Nam included data provided by child respondents. Another important consideration for and potential limitation of valid comparison is how the surveys were administered, with main differences highlighted in Table A3 (Annex A). Variations in definitions of dependent and independent variables, sampling methods and of course contextual factors, such as cultural views of violence (e.g. social norms), contribute to challenges in comparability and interpretation; these are considered in more detail in the section entitled Challenges below.

Interventions mapping exercise

Mapping the intervention landscape, particularly for prevention of VAC, was a complementary part of the Study. An intervention is seen as a coordinated group of activities around a specific purpose for a targeted population. In the context of violence prevention, an intervention objective would be to prevent and reduce the drivers of violence against children and in families and communities—or alternatively to promote protective factors for children. Interventions included in the mapping had violence prevention as an explicitly stated objective or saw it as a proxy outcome.

The activity highlighted numerous challenges in conducting national mappings of interventions—in addition to difficulties with identifying existing interventions in countries where information on such activities is usually scattered, the most significant issue was the actual lack of properly evaluated interventions. This has been recognized widely in the child protection literature as a chronic challenge (UNICEF, 2015).²⁷

Yet learning from previous interventions – commonly referred to as a ‘what works’ analysis – is important. While findings from the scoping served to inform nationals of the paucity of good evaluations, overall the scoping was not successful in uncovering further understandings of the drivers of violence. Interventions mappings were led by the three UNICEF Country Offices (Zimbabwe, Peru, Viet Nam) and Istituto degli Innocenti in Italy, and were used to inform research concept notes developed to take forward their violence prevention work using implementation science to improve violence prevention interventions (see an article summarizing this work at: www.unicef-irc.org/article/1584/).

Challenges

The goal of this study was to understand violence within each national setting and look for common trends across countries and specific trends within countries. Any actual comparison between countries is problematic given the limitations described under the specific method components above and in this section.

In all countries, this was the first effort to review as completely as possible existing literature and databases that addressed violence affecting children, posing limitations for both the literature review as well as the secondary data analysis. Importantly, all statistics on violence are likely to underestimate its true prevalence due to strong social stigma and the absence of effective response services or protection should someone report an incident. This is particularly true of sexual violence (see for example Palermo, Bleck and Peterman, 2014).²⁸

Further, each of the nationally representative surveys available in these four countries used different definitions to measure violence, a problem that generally challenges comparability of VAC data globally, regionally and even nationally. Within this Study, this not only limits our ability to make direct comparisons between studies, but may also affect prevalence rates, as research shows that *how* questions are asked – including the language used – can influence reporting of violence (Dartnall and Jewkes, 2011). Table 2 highlights the variability of definitions used in surveys from each of the four countries, using sexual violence as an example. While surveys in Italy and Viet Nam used only one question to measure sexual violence, the Peru and Zimbabwe surveys asked several behavioural-specific questions, which has been shown to increase reporting of sexual violence (Stoltenborgh et al., 2011). Though this is only an example of one type of violence, it highlights the important limitation of differing definitions when making comparisons.

27 UNICEF, *Child Protection Resource Pack: How to Plan, Monitor and Evaluate Child Protection Programmes*, 2015.

28 Palermo, T., Bleck, J. and A. Peterman, ‘Tip of the iceberg: reporting and gender-based violence in developing countries’, *American Journal of Epidemiology*, vol. 179, no. 5, 2014, pp. 602–12.

Table 2: Definitions of sexual violence across data sets

Country/data set	Survey question(s) to measure sexual violence ⁱⁱ
Italy / <i>La violenza contro le donne dentro e fuori la famiglia</i> ('Violence against women')	Before you were 16, did someone touch you sexually or force you into any sexual activity against your will?
Peru / ENARES (National Survey on Social Relations)	Eleven questions were asked about experiences of sexual abuse: a) are you subject to or have been subject to uncomfortable stares at your private parts?, b) Is anybody making or has made suggestive comments or jokes when talking to you?, c) Are you being pressured or have been pressured into viewing pornography through magazines, pictures, or internet?, d) Has anybody masturbated in your presence?, e) Is anybody forcing you or has forced you to masturbate?, f) Is anybody showing you or has showed you his/her genitals? g) Is anybody grabbing you or has grabbed you and has tried to take your clothes off?, h) Are you being forced or have you been forced to deliberately touch or grab the body of another person?, i) Are you a victim or have you been a victim of offensive touching with regard to some part of your body?, j) Are you being threatened or have you been threatened into having sex?, and k) Are you being coerced or have you been coerced into having sexual relations?
Viet Nam / SAVY (Survey and Assessment of Vietnamese Youth: Rounds 1 and 2)	Have you been forced to have sex with anyone?
Zimbabwe / NBSLEA (National Baseline Survey on Life Experiences of Adolescents)	<p>Sexual violence was defined as sexual activity where consent is not obtained or voluntarily given. The survey considered sexual violence as any of the following:</p> <p>(a) Unwanted sexual touching which includes unwanted kissing, grabbing or fondling, measured by the question:</p> <p>These questions ask you about a time when anyone, male or female, touched you in a sexual way without your consent, but the person did not try and force you to have sex. Touching without consent includes being fondled, pinched, grabbed, or touched against your will. How many times in your life has anyone touched you in a sexual way without your consent, but did not try and force you to have sex?</p> <p>(b) Attempted sex without consent, measured by:</p> <p>How many times in your life has anyone tried to make you have sex against your will, but did not succeed?</p> <p>(c) Physically forced sex, measured by:</p> <p>How many times in your life have you been physically forced to have sex against your will and sexual intercourse was completed? By physical force, we mean things like being pinned or held down or use of violence like pulling your hair, pushing, shoving, punching, kicking, stuffing or choking.</p> <p>or (d) Pressured sex which includes threats, harassment, luring, or tricking, measured by:</p> <p>How many times in your life has someone pressured you to have sex when you did not want to, and sex happened? When someone pressures you into sex, it could involve things like threats, harassment, luring you, or tricking you into having sex.</p>

ⁱⁱ The English translation of the Italian survey question was found in Istat’s methodological notes. The survey questions from Peru and Viet Nam were translated by native speakers, who are also statisticians.

The secondary data analysis was also limited by the sampling frames used in each of the surveys. The Italy/Vite in Bilico and Istat studies used a nationally representative sample of women but there is no known equivalent data for men’s (or boys’) experiences of violence in Italy. While the sampling methods employed in Peru/ENARES excluded out-of-school children, Viet Nam/SAVY excluded those who do not live at home, such as children and young adults who are homeless, those who live in institutions (such as student dormitories or social protection centres), migrants and those who live in newly built residential areas, which do not have official addresses; of which there are many in rapidly expanding cities such as Hanoi and Ho Chi Minh City (Vu Manh Loi 2015). Zimbabwe/NBSLEA, which used the national census as its sampling frame, also excludes similarly vulnerable groups of children and young adults. These excluded groups may be particularly vulnerable to violence leading the findings to further underestimate the true occurrence, or potentially fail to characterize those most at risk²⁹. Further, as a study on childhood poverty, the Young Lives study in Peru and Viet Nam worked with a ‘pro-poor’ sample, meaning researchers oversampled children from poorer areas, which affects generalizability and may produce overestimates of prevalence rates, as poverty and related stresses at the family level are risk factors for violence (see also the section on Risk and Protective Factors). Finally, the Zimbabwe Childline analysis is based on administrative data and reflects only those children who contacted Childline—a national helpline accessible through a telephone call. The likelihood of reporting to Childline may be affected by geographic access to services and fear of reporting.

²⁹ See: Carr-Hill, R. (2013). Missing millions and measuring development progress. *World Development*, 46, 30-44.

3. IDENTIFYING RISK AND PROTECTIVE FACTORS

Through our initial analyses, the spaces and places where children live, play, learn and sleep emerged as a defining factor in their risk of experiencing violence. As a result, the main unit of analysis used in this section on risk factors is *place*—recognizing that, in line with other global findings, most violence affecting children occurs in families, communities and schools and is committed by people the children know.³⁰

The initial analysis conducted in each country – largely framed in terms of ‘risk factors’ – failed to capture children as active agents rather than passive recipients of protection or harm. Children’s agency matters and may change as they grow, according to key social identifiers like gender, and as they move from place to place. A focus on measuring ‘protective factors’ goes some way to rectifying this problem. However, the process of co-discovery that occurred within each country makes clear that risk and protective factors are only part of the story. Situating these in larger macro contexts (which we delineate into ‘institutional’ and ‘structural’) is essential; this is done in the next section on Drivers.

Risk factors are not static; they evolve as children live, learn, sleep, play and work and as they move through the lifecycle. This evolution is therefore intimately linked to place. In each setting – the home, the school and the community – it became clear that risk factors at the individual, interpersonal and community level could be moving/acting/interacting in different ways and at different times. Understanding what kinds of violence happen in places where children live, learn, sleep, play and work can help determine where interventions for violence prevention might have the most impact.

With this approach in mind, the findings presented below summarize key findings on prevalence and risk factors across the four countries and conclude with an in-depth analysis of how these factors interact across spaces and socio-ecological levels using Zimbabwe as an example. For a more comprehensive overview, see our Cross-Country Snapshot of Findings.³¹

Key findings: Prevalence, polyvictimization and patterns of risk

Prevalence of physical, sexual and emotional violence against children across four countries

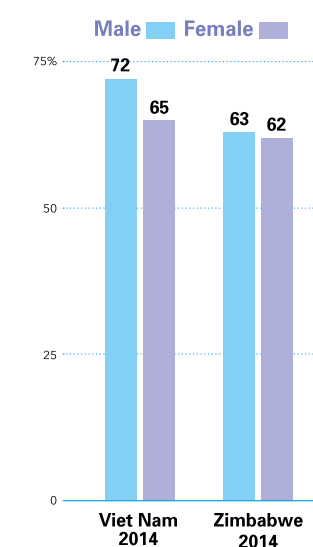
The nationally representative surveys utilized in the Study (described in the previous section) provided us with overall prevalence data and also allowed us to explore the ‘who’, ‘what’ and ‘where’ of violence through our secondary

Figure 5. Prevalence of violent discipline, Zimbabwe & Viet Nam

RISK OF VIOLENT DISCIPLINE

Girls and boys are at similar risk of violent discipline in the home.

Percentage of children aged 1 to 14 who experienced any violent discipline in the past month.



Zimbabwe: MICS data and Viet Nam: MICS data.

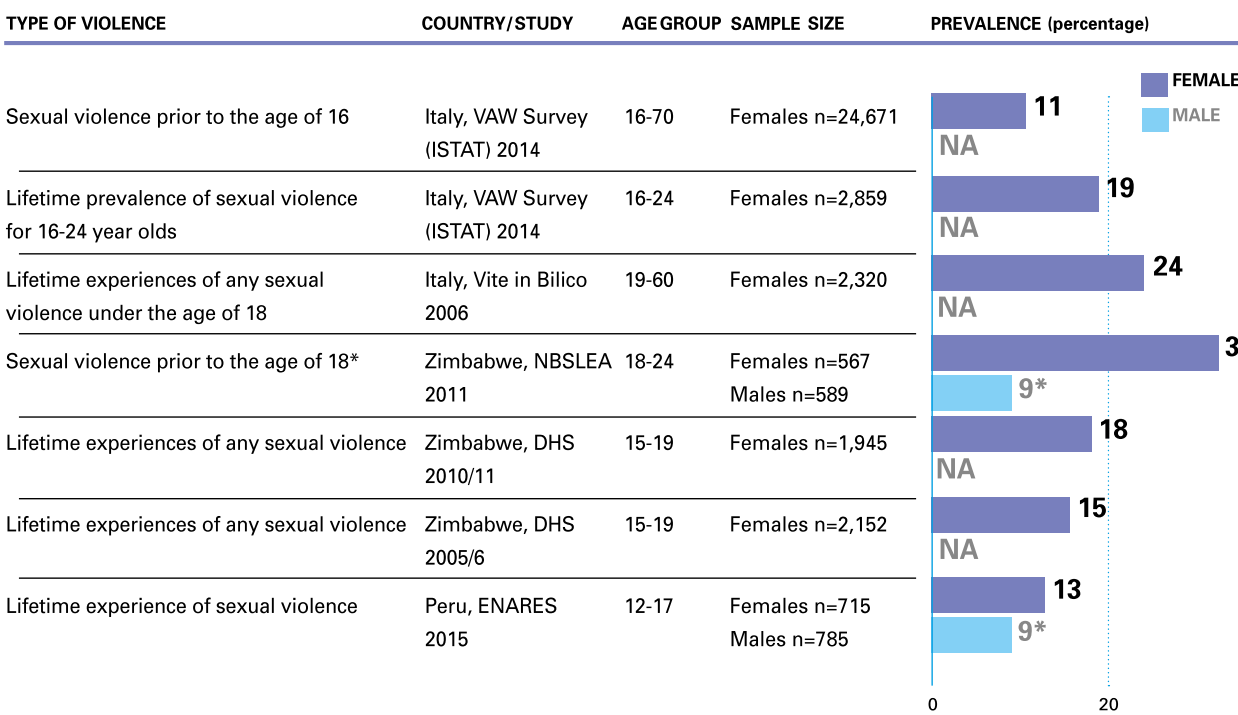
³⁰ Pinheiro P. S., *World report on violence against children, United Nations Secretary-General's study on violence against children*, United Nations, Geneva, 2006.

³¹ Maternowska, M.C., Potts, A., Fry, D., ‘The multi-country study on the drivers of violence affecting children. A cross-country snapshot of findings’, *Miscellanea*, UNICEF Office of Research – Innocenti, Florence, 2017, www.unicef-irc.org/publications/874

analyses. Across all forms of violence in all settings, disaggregating data by age and gender is crucial for understanding who is most affected and at what point during the life course. The key findings on the prevalence of violence are presented below:

- **Physical violence** (see Figure 5): Data on the prevalence of violent discipline across the four countries is similar to global data (see for example UNICEF’s *A Familiar Face*). Physical bullying and corporal punishment are more frequent among boys and show some declining trends with age (corporal punishment in Viet Nam and Peru) and time (e.g. bullying throughout Italy).
- **Sexual violence**: The prevalence rates available for each country differ greatly (see Figure 6), with those in Zimbabwe and Italy being higher and lower, respectively, than global estimates. A number of factors prohibit direct comparison (see Methods section); however, the higher prevalence recorded in Zimbabwe is likely due at least in part to a more focused measurement: Zimbabwe is the only country where a violence against children survey (VACS) was undertaken (NBSLEA). In addition, national surveys conducted in Viet Nam (SAVY) and Peru (ENARES) may suffer from sampling issues that exclude important sub-populations of adolescents and young people (i.e. those living away from home, those not attending school), while in Italy, the *Vite in Bilico* survey mostly focused on older adults and therefore may be more susceptible to recall bias (see the Methods section for more details). Data regarding trafficking for sexual exploitation can be particularly difficult to ascertain due to a number of challenges to safe, ethical data collection and monitoring. While evidence exists in all settings, sexual exploitation and trafficking were particularly pronounced in the findings from Italy and Viet Nam (see the Drivers section for a discussion of potential drivers).

Figure 6. Prevalence of sexual violence affecting children



*Notes statistically significant difference between prevalence estimates for males and females at p<.05

Findings highlight that girls are much more likely to be affected by sexual violence. Boys are also affected although they are less likely to be asked about it in surveys. Estimates are from primary analyses of national data sets across Italy, Peru and Zimbabwe. All of the questions were framed as sexual violence questions within these nationally-representative surveys. However, definitions of sexual violence vary widely and so present challenges for comparison. Some prevalence estimates are weighted (e.g. NBSLEA). For detailed descriptions of definitions, statistics and confidence intervals, see the accompanying endnotes at: www.unicef-irc.org/research/274.

- **Emotional violence**: Emotional violence varies between countries and data on who is most vulnerable to experiencing emotional violence in the home differs (see Figure 7). In schools, across all countries, girls experienced emotional violence more frequently than physical violence from peers.

Figure 7. Prevalence of emotional violence affecting children

Emotional violence may be perpetrated by a range of people – including parents, siblings, partners and peers. It often occurs alongside other forms of violence and can be particularly difficult to define and measure. Represented below are different expressions of emotional violence across all four countries.



ITALY
A national study in Italy found that 13.7 per cent of maltreated children cared for by social services have suffered emotional abuse. The same study also states that 19.4 per cent of children assisted by social services have witnessed domestic violence.

Source: CISMAI, Terre Des Hommes, Italia. Autorità garante per l’infanzia e l’adolescenza, Indagine nazionale sul maltrattamento dei bambini e degli adolescenti in Italia 2015, Torino, CISMAI, 2015.



VIET NAM
In Viet Nam, 58.2 per cent of Vietnamese children aged 1-14 have experienced psychological aggression at home.

Source: Cappa, C., & Dam, H. (2014). Prevalence of and risk factors for violent disciplinary practices at home in Viet Nam. *Journal of interpersonal violence*, 29(3): 497-516.



PERU
In Peru, 69 per cent of both males and females aged 12 to 17 report having experienced peer-to-peer psychological violence at school at some point in their lives.

Source: Fry, D., Anderson, J., Hildalgo, R.J.T. et al., (2016). Prevalence of violence in childhood and adolescence and the impact on educational outcomes: Evidence from the 2013 Peruvian National Survey on Social Relations. *Int. Health*, 8(1): 44-52.
Note: Definitions of emotional violence vary by study.



ZIMBABWE
In Zimbabwe, a national study found that among 18- to 24-year-olds, 29 per cent of females and 39.1 per cent of males reported experiencing emotional violence from an adult before the age of 18.

Source: Zimbabwe National Statistics Agency (ZIMSTAT), United Nations Children’s Fund (UNICEF) and Collaborating Centre for Operational Research and Evaluation (CCORE), 2013. National Baseline Survey on Life Experiences of Adolescents, 2011.

In another study in Zimbabwe, nearly 30 per cent of adolescent girls aged 15-19 report having experienced emotional violence by a partner. When compared to national data in eight other countries in East and Southern Africa, this represents the highest prevalence estimate for the region.

Source: Latest available DHS (or MICS) data presented for 42 countries, including 9 countries in the East and Southern Africa region, as cited in United Nations Children’s Fund, *Hidden in Plain Sight: A statistical analysis of violence against children*, UNICEF, New York, 2014.

- **Polyvictimization**: Children in all four countries were at risk of experiencing multiple forms of violence or violence in multiple settings (home, school, community). Children who did experience one form of violence were often at an increased risk of experiencing other forms of violence and the limited data on outcomes shows that the negative outcomes for these children increase and may be more severe.

Digging deeper: Polyvictimization

Global evidence on polyvictimization emphasizes the importance of the interconnectedness of violence; that is, experiencing one type of violence increases the risk of experiencing other forms of violence and also increases vulnerability to experiencing violence in other settings (Leoschut and Kafaar, 2017; Palermo et al., *in press*³²). Echoing this, analysis of data from Zimbabwe in this study shows that previous experiences of violence increase the risk of further and different forms of violence in childhood (Chigiji et al., forthcoming; Mwadiwa et al., forthcoming). In Viet Nam, children who witness parental violence at home are more likely to bully others and/or be victims of bullying (Le et al., 2017). Le and colleagues (2017) note that while most bullying experiences occur at school, predictors of bullying perpetration were almost all related to the home environment.

In each of the countries, polyvictimization is common. In Viet Nam, about three quarters of 1,606 high school students in Ha Noi had experienced at least four types of victimization in their lifetime (74.5%); nearly one third reported experiencing more than 10 forms of victimization (31%; Le et al., 2015). In Italy, according to the national retrospective survey Vite in Bilico, 18 per cent of 2,320 women aged 19–60 years reported experiencing both sexual abuse and another type of maltreatment such as physical abuse, neglect or psychological abuse during their childhood (Bianchi and Moretti, 2006).

Data from Peru includes analysis on the places in which multiple types of violence occur, as well as age differences. The 2015 ENARES survey (INEI, 2016) found that younger children aged 9–11 years more frequently reported both physical and psychological violence at *school* compared to older children aged 12–17 years (36% and 28%, respectively). Conversely, experience of both physical and psychological violence at *home* was more commonly reported among 12–17 year olds (52%) compared to 9–11 year olds (44%).

Gender differences emerged among victims of violence in Zimbabwe, with girls being more likely to experience sexual violence in addition to other types of violence compared to boys. A nationally representative survey found that among 18–24 year olds who experienced sexual violence during their childhood, about 63 per cent of females and 7 per cent of males said they experienced two or more incidents (ZIMSTAT, UNICEF and CCORE, 2013). About 14 per cent of females said they experienced both sexual and physical violence before the age of 18 while the most common experience of polyvictimization among boys was physical and emotional violence (25%).

Polyvictimization is associated with a number of negative mental, cognitive and behavioural health outcomes (Finkeholr et al., 2005; Radford et al., 2011; Chan, 2013), including poorer intellectual functioning and disruptive behaviour (Samms-Vaughan and Lambert, 2017). Data from Viet Nam shows that polyvictimization has strong associations with increased and more severe outcomes including depressive symptoms, anxiety and past-year suicidal thinking as well as lower levels of subjective well-being, happiness, and physical health-related quality of life (Tran et al., 2015).

This data shows that focusing solely on one type of violence or even on one place where violence occurs – as is commonly done in large-scale surveys and some qualitative studies – will only provide part of the picture of a child’s risk of violence.

³² VACS analysis we did with SEP, COs and CDC: ‘Determinants of Childhood Violence and Polyvictimization: A Cross-Country Analysis from Three Regions’

Patterns of risk factors for VAC across four countries

Analysing risk factors across the four countries revealed the following patterns (*see also Figure 8*):

- **Risk factors at the individual level are similar across countries and for all types of violence.** Most at-risk children across all four settings include, for example, orphans, out-of-school children and ethnic minorities. For violence within schools, the vulnerabilities that are visible (such as physical indications of poverty, sexual identity and ethnicity) put children at increased risk of both peer violence and corporal punishment within schools.
- **Risk factors at the interpersonal and community levels differ but broad themes emerge across countries,** for example:
 - the quality of relationships between the child and adults in his/her life;
 - gender norms³³ that support or reinforce gender inequality (i.e. norms around gender roles);
 - childhood, hierarchy and talking about violence; and
 - adverse events and circumstances that create stressors for adults—including both external (economic stressors) and internal (previous experiences of violence) circumstances.
- **Violence begins in the home:** Studies highlight that violence often begins in the home and creates risk of experiencing violence in other settings including at school, in the community and online.
- **Multiple risk factors matter:** Children who experience multiple risk factors – within and across the individual, interpersonal and community levels of the socio-ecological framework – are at an increased risk of experiencing violence. Similarly, children who experience one form of violence are also at an increased risk for experiencing further and different forms of violence.³⁴
- **Importance of applying ‘social norms’ lens to understand why violence happens and how to better intervene to prevent it:** Adults’ beliefs in the effectiveness and necessity of the use of punishment using violent methods (both physical and psychological), as well as their belief that other adults engage in this behaviour, increases the risk of children experiencing this form of violence (including violent discipline in the home and corporal punishment in schools).

³³ A recent DFID guidance note defines ‘gender norms’ as: “widely held beliefs about what is typical and appropriate behaviour for men and women, and boys and girls that shape how men and women see themselves as men and women, their social and intimate relationships, their sexuality and the allocation of power and resources. Violence is often, although not always, a part of dominant constructions of masculinity in many societies.” Source: Alexander-Scott, M. Bell, E. and J. Holden, ‘DFID Guidance Note: Shifting Social Norms to Tackle Violence Against Women and Girls (VAWG)’, VAWG Helpdesk, London, 2016.

³⁴ See also the foundational research into how an increasing number of adverse childhood experiences are linked to increased risk of adverse social and health outcomes—including future violence victimization and perpetration. www.cdc.gov/violenceprevention/acestudy/



Figure 8. Summary of risk factors

See: www.unicef-irc.org/publications/pdf/MCSDVAC_revised12072017.pdf

COMMUNITY RISK FACTORS

- Urban and/or rural environments may have varying risks of violence
- Harmful cultural practices and/or social norms that support violence, including taboos
- Quality of community relationships such as the lack of community connectedness and trust; perceptions of community safety
- Code of silence around all types of violence

ITALY Trafficked Nigerian girls are threatened with retribution against themselves and relatives at home if they try to escape or fail to pay back their debt; this includes the manipulative use of traditional spiritual practices to maintain control over the girls and their families.

INTERPERSONAL RISK FACTORS

- Early experience of violence and conflict before adolescence, including witnessing domestic violence
- Sex selection
- Family stress including poverty and unemployment
- Family structure including marital status, parental absence, double-orphanhood
- Family context such as parents' histories of abuse, substance use, education, occupation(s), financial status, illness/health
- Quality of peer relationships inclusion/exclusion from same age networks
- Quality of family relationships inclusion/exclusion from family/kin networks⁵⁴⁻⁵⁵
- Isolation or degree of family isolation⁵⁶

PERU Some girls (aged 13-17 years old) involved in transactional sex persuade their female peers to also engage in transactional sex.

INDIVIDUAL RISK FACTORS

- Beliefs about gender roles or the acceptability of punishment and violence
- Vulnerability due to age, ethnicity, or disability
- Behavioural problems such as a lack of empathy and externalising these behaviours among children
- Biological sex

ZIMBABWE Girls, aged 13-17, are more likely to experience forced sex than boys of the same age.

VIET NAM Boys, aged 5 – 9, are more likely to experience violent discipline in the home and school than girls of the same age.

Digging deeper into risk and protective factors: Key findings by place

Using the risk factors identified, we then examined how these manifest in the home, school and community. For each setting, we first reviewed the overall prevalence of different types of violence as gleaned from the literature reviewed and secondary analyses completed. Second, we considered the risk or protective factors – or combinations of these – identified at the individual, interpersonal and community levels. Detailed data on violence by place – home, school, community – and key risk factors at the individual, interpersonal and community levels within each is summarized in Annex B.

The findings detailed there – covering the spaces and places where children live, learn and play, including their homes, schools and communities – demonstrate how risk factors related to a child’s vulnerability can be individual, interpersonal or community-determined, moving between and among the different levels of the socio-ecological framework (see Table 3). While these boundaries are useful for synthesizing and analysing violence data, in reality the boundaries between such spaces are porous, meaning the table below should be viewed as an aid to understanding rather than a strict categorization tool.

Table 3. Summary of factors examined in the literature reviewed, in relation to how they may protect children and/or put them more at risk—by place and socio-ecological level. See Annex B for further details.

	INDIVIDUAL level	INTERPERSONAL level	COMMUNITY level
At HOME	<ul style="list-style-type: none"> ■ Age ■ Gender ■ Ethnicity ■ Disability ■ Orphanhood status ■ Immigration status ■ Parents’ belief in the effectiveness and necessity of the use of violence ■ Parents’ belief that other adults use violent discipline ■ Beliefs about gender roles 	<ul style="list-style-type: none"> ■ Witnessing domestic violence ■ Parental alcohol or substance misuse ■ Parents’ histories of abuse ■ Family structure (parental death, divorce/separation, parental absence) ■ Family stress (parental emotional or mental tension due to illness, unemployment or poverty) ■ Family context (family isolation or lack of social support networks) ■ Quality of family relationships 	<ul style="list-style-type: none"> ■ Urban/rural differences ■ Codes of silence ■ Harmful traditional practices ■ +/- Quality of community relationships
At SCHOOL	<ul style="list-style-type: none"> ■ Age ■ Gender ■ Physical indications of poverty ■ Sexual identity ■ Ethnicity ■ Being out of school ■ Over-/under-achievement ■ Teachers’ and parents’ belief in the effectiveness and necessity of the use of violence ■ Beliefs about gender roles 	<ul style="list-style-type: none"> ■ Experience of violence at home ■ Quality of student/pupil relationships ■ Academic stress from families ■ Quality of family relationships / family context (parental psychological distress, parental health problems, low parental education, low parental income) 	<ul style="list-style-type: none"> ■ Urban/rural differences ■ Norms around silence/ not speaking out about or addressing violence in school
In the COMMUNITY	<ul style="list-style-type: none"> ■ Age ■ Gender ■ Orphanhood status 	<ul style="list-style-type: none"> ■ Early experience of violence, especially at home ■ Family context (drug misuse, household dysfunction) ■ Family financial stress ■ Family structure (parental absence or death) ■ Quality of family relationships 	<ul style="list-style-type: none"> ■ Urban/rural differences ■ Quality of community relationships ■ Belief that sexual exploitation is not a serious issue ■ Manipulative use of traditional spiritual beliefs and practices by traffickers to maintain control over victims ■ Harmful social norms related to gender

Protective factors include:

- Quality of family relationships (at HOME, INTERPERSONAL level)
- Quality of student/pupil relationships (at SCHOOL, INTERPERSONAL level)
- Quality of community relationships (at COMMUNITY level)

Each of these protective factors was also identified as a risk factor in different contexts. For example, the quality of community relationships was protective in Zimbabwe (NBSLEA data showed that girls who say they have people in the community who they trust are less likely to experience unwanted touching; Mwadiwa et al., forthcoming) and a risk factor in Viet Nam and Peru (children’s risk of violence increased due to diminishing community cohesion because of rapid social changes in Viet Nam (Young Lives data, Pells and Woodhead, 2014) and migration in Peru (according to studies from the literature review, including IPEC, 2007; Mujica, 2014).

Overall, this analysis shows how factors are hard to label, particularly when looking at characteristics such as age, gender, ethnicity, etc. As noted above, one of the Study’s main frameworks is the age/ gender timeline, looking at how a child’s risk of experiencing (or perpetrating) certain types of violence in certain places may fluctuate throughout his or her life. This is particularly evidenced in the longitudinal qualitative analysis carried out in collaboration with Young Lives/University of Oxford within the Study.³⁵ Thus, many factors are hard to categorize as ‘risk’ or ‘protective’ for all types of violence for all children. Furthermore, most of these factors are treated as risk factors in the literature when they could be both, depending on the point in the lifecycle of a child.

Understanding polyvictimization in Zimbabwe

Together, the data collected in this Study demonstrate the importance of a holistic approach to children’s experiences of violence, which examines the interactions of risk factors and drivers within and between settings. Polyvictimization is one manifestation of such interactions, which are further illustrated by examples below. To illustrate this point we draw on the Zimbabwe NBSLEA data set, a nationally representative survey asking similar questions about all three types of violence.

Samples from each data set (male and female) were narrowed by restricting data to include only those 13–17 year olds who had experienced emotional violence, physical violence and sexual violence in the past year. The following case studies are drawn from those respondents who reported experiencing some form of violence at home, school and in the community. Location of where the violent event occurred was asked only for sexual violence. For physical and emotional violence, violence was considered to have taken place at home if perpetrated by a family member, at school if perpetrated by a teacher, headmaster or peer, and in the community if perpetrated by a neighbour, police, military, employer or other person. The case studies below were among the respondents reporting the highest number of violence experiences.

³⁵ See longitudinal qualitative experiences in India (Andhra Pradesh and Telangana) www.unicef-irc.org/publications/866/
Peru www.unicef-irc.org/publications/865/
Ethiopia www.unicef-irc.org/publications/867/
Viet Nam www.unicef-irc.org/publications/868/

Respondent: Girl aged 15

Violence type	Specific	Perpetrator identified
Physical violence in the past year	Punched, kicked, whipped or beaten with an object	Aunt
	Punched, kicked, whipped or beaten with an object	Male teacher
Emotional violence in the past year	Made to feel unwanted	Aunt and female relative (other than mother/step-mother, sister/step-sister or aunt)
Sexual violence in the past year	Attempted sex	Person known to the victim (other than a partner, relative or authority figure)
	Pressured sex	Boyfriend

Respondent: Boy aged 15

Violence type	Specific	Perpetrator identified
Physical violence in the past year	Punched, kicked, whipped or beaten with an object	Father and mother
	Punched, kicked, whipped or beaten with an object	Male teacher
	Punched, kicked, whipped or beaten with an object	Male authority figure (other than teacher, police, military, employer, or community or religious leader)
Emotional violence in the past year	Humiliated in front of others	Male teacher
Sexual violence in the past year	Unwanted sexual touching	Not known to the victim

Behind each of these tables is a child experiencing violence at the hands of multiple actors in multiple places. For one 15-year-old girl in Zimbabwe, this means being physically abused at home by her aunt and facing similar abuse at school by a male teacher; while we do not know which incident preceded the other or how frequently they occur, we can see that different actors within the child’s *interpersonal* sphere are violent towards her. She has also faced attempted sex while fetching water, showing that there are places in the community that are not safe for her. Interactions between home and school were seen in other literature reviewed; for example, in Zimbabwe the lack of family support and children’s experiences of severe punishment at home were risk factors for bullying behaviour at school (Ncube, 2013).

For one 15-year-old boy in Zimbabwe, physical violence is again a reality both at home by his father and mother and at school by a male teacher, as well as by a male authority figure other than a teacher. In addition, the boy experiences emotional violence in the form of humiliation in front of others by a male teacher. It is not known if this is the same teacher or not; in Zimbabwe, corporal punishment has only recently been outlawed in schools. A study included in our Zimbabwe literature review found that the second most frequent perpetrator of physical violence against boys was a teacher (ZIMSTAT, UNICEF and CCORE, 2013).

The reality for these children in Zimbabwe is harsh; they have faced multiple types of violence at the hands of adults who should be caring for them. While location data is not available for all incidents, it appears that their own homes, their schools and their communities are not safe places; neither is the home of the young girl’s intimate partner. In Zimbabwe, nearly 30 per cent of adolescent girls reported experiencing emotional violence at the hands of a partner and 78 per cent of all sexual violence against adolescents was perpetrated by an intimate partner (ZIMSTAT, UNICEF and CCORE, 2013). When compared to national data in eight other countries in East and Southern Africa, Zimbabwe has the highest prevalence of adolescent relationship violence in the region (UNICEF, 2014).

What puts this Zimbabwean girl and boy at such risk? A body of research exists around specific factors related to children’s **vulnerability**, normally defined using factors such as age, gender, ethnicity, disability and orphanhood status, as these characteristics may put children at increased risk. Depending on context, these factors may also **protect** children from violence. The combination of the acts described above leaves one wondering what supportive adults exist in these children’s lives, what safe spaces they go to, and what other assets they draw upon to face such violence.

Annex B further explores specific risk and protective factors uncovered in this Study. In addition to Annex B, the country-specific reports contain further details drawing on a wide range of nationally and internationally led quantitative and qualitative studies, including ethnographies, surveys and administrative data from sources such as Childline in Zimbabwe (see Annex C for links to country reports).



4. STRUCTURAL AND INSTITUTIONAL DRIVERS OF VIOLENCE: INVISIBLE FORMS OF HARM

While the risk and protective factors described in the previous section are important, they cannot be understood in isolation from a child’s social ecology or a child’s relationships within differing environments. These risk and protective factors are intimately connected to **the drivers of violence**, which we defined as the institutional and structural level factors that create the conditions in which violence is more (or less) likely to occur. In this section we review some of the salient factors – or structural and institutional drivers – identified in the four countries.

As described elsewhere (see our ‘Snapshot’ of findings: www.unicef-irc.org/publications/874/), these factors are based on the literature review conducted and are supported by at least one study in a peer-reviewed journal.

The drivers of violence are the factors at the institutional and structural levels that create the conditions in which violence is more or less likely to occur.	Structural and institutional drivers that appeared consistently in the literature across all country sites:	
	STRUCTURAL <ul style="list-style-type: none">■ Rapid societal transformations (including political, social or economic changes) from historical to present■ Poverty■ Gender inequality and patriarchal norms■ Migration	INSTITUTIONAL <ul style="list-style-type: none">■ Weak or ineffective CP systems■ Weak or ineffective legal structures■ Poor school governance

These factors or combinations of factors are most often invisible forms of harm in and of themselves that create and maintain inequalities within and between, for example, different social groups or genders. While the drivers of violence are listed in discreet categories here, differentiating between what is a structural or an institutional driver is, in part, a conceptual exercise. Drivers are rarely isolated factors and tend to work in potent combination with other factors within a single level, as well as between levels, of the social ecology that shapes children’s lives.

Structural drivers across the four countries

First we analyse the four most common **structural** drivers identified in the literature across the four country sites: **rapid societal transformations** (including political, social or economic changes from historical to present), **poverty**, **gender inequality** and **migration**. These are not the *only* structural drivers of violence but are the main factors that appeared consistently in the systematic reviews across the four countries. Common patterns that emerge will be discussed at the end of each section.

Structural Driver

Rapid societal transformations include the political, economic and social changes from past to present that occur over time. Societies and cultures are not static but constantly being renewed, reshaped or reformulated by a combination of structural and global forces.

Rapid societal transformations

The structural analysis of drivers among the four countries begins with understanding changes in political and economic factors over time (which also influences cultural change). The impact of these changes on children is broad and would be difficult to fully capture in any review. Instead, our analysis focuses on making links between the way that macro-level changes in the political economy of a country shape the context in which children live and learn. Here, we first review each country's relatively recent societal transformations, noting in particular how these shifts create changes at the community and family levels that might impact children's well-being.

Italy

The Italian economic miracle (*il miracolo economico* or *boom economico*) is the term used by historians, economists and the mass media to designate the prolonged period of strong economic growth in Italy between the end of the WWII and the late 1960s. This phase of Italian history represented not only a cornerstone in the economic and social development of the country – which was transformed from a poor, mainly rural nation into a major industrial power – but also a period of momentous change in Italian society and culture. At the same time, a steadily declining birth rate in Italy has meant that children today grow up in very different types of families from those of their parents and grandparents, without as many siblings or cousins (Istat, 2011). The concept of Mediterranean 'familism' is on the rise and explains the demographic and social policy distinctiveness of Southern Europe, where the family plays a central role in the welfare system, acting as the main provider of care and welfare for children and dependent individuals (Mínguez, 2013). Increasingly, Italian parents provide the main social safety net, supporting their children mainly through prolonged co-residence, and children are expected to leave the parental home only after completing their education, finding a stable job and marrying (Albertini and Kohli, 2012). This trend may be on the increase.

Peru

While Peru has made great strides economically since the 1980s, about 8 million people remain poor and poverty is deepest among people of indigenous origin living in remote rural areas. Although more and more Peruvians benefit from economic growth, inequality persists. Peruvian norms are shifting away from familism and localized, communitarian systems of protection to those based on individualism and liberal, urban values. Protection (social welfare) in urban areas is bureaucratized through a systems approach, with little consensus concerning certain norms such as discipline, caretaking responsibilities and children's rights (Anderson, 2016).

Viet Nam

Doi Moi, commonly referred to as the renovation in the mid-1980s, transformed the previously planned, vertically oriented, largely agricultural economy into a market system in which trade was opened up to the rest of the world. Within a quarter of a century, the country moved from being one of the poorest in

the world, with per capita income of around US\$100, to its lower middle income status, with per capita income of around US\$2,100 by the end of 2015. Economic liberalization has widened the gap between rich and poor as well as between urban and rural dwellers (Rubenson et al., 2005).

Doi Moi contributed to a shift that was well beyond being only economic. Studies show that prior to the opening of the economy, Vietnamese family structures were strongly influenced by patriarchy and Confucian values conferring upon men power over women and children in the family, community and society (GSO, 2010; MOLISA and UNICEF, 2011; Dao The Duc et al., 2012; Rydström, 2006a). Although patriarchy remains strong in Viet Nam, women now have greater decision-making power within the family than in the past. Intergenerational households are increasingly giving way to nuclear families; however, according to the evidence, these economic and social changes are contributing to an erosion of the extended family, which traditionally protected children from violence (Pells and Woodhead, 2014).

Zimbabwe

Zimbabwe, a low income country, has long endured a highly unpredictable economy. The country's first 18 years of independence, from 1980 to 1998, were characterized by impressive economic growth and major social development programmes aimed at reducing economic and social inequalities (UNICEF and Government of Zimbabwe, 2011). Social development indicators rose and disparities shrank. Two important issues – the HIV/AIDS pandemic and the International Monetary Fund (IMF)/World Bank supported Economic Structural Adjustment Programme (ESAP) adopted between 1990 and 1995 – disrupted this growth and the economy plummeted with very slow growth. From 2009 to 2012, the economy finally rebounded, with growth rates averaging around 8.7 per cent per year; however, recent reports and political tensions point towards another dip.

In Zimbabwe, the tightly knit social fabric of the traditional or extended family structure has been negatively affected by these periods of economic hardship. The HIV/AIDS pandemic affected family composition while adult mortality was high. Family roles and values shifted. The high mortality rate related to HIV/AIDS among Zimbabweans aged 15–49 years also increased the dependency ratio and left approximately 25 per cent of children orphans, leaving the burden of childcare to the elderly (Government of Zimbabwe and UN Zimbabwe, 2010; ZIMSTAT, 2015b; Meinck et al., 2014). Some suggest that this has created two different but often interrelated effects within Zimbabwean society (Chirozva, Mubaya and Mukamuri, 2006). First, Zimbabwe experienced 'a shift toward nuclear households', with a parallel increase in female-headed households, especially in the poorest sectors. Second, where parents have died, grandparents have been left in charge but without the renewed emotional, physical or financial capacity required for the task of caretaking. These disrupted family structures leave children vulnerable, a situation where the psychological and physical well-being of boys and girls is likely to erode.

Rapid societal transformations across all four countries

Political, economic and social changes from past to present occur naturally, over time and in all states. Societies and cultures are not static but constantly being renewed, reshaped or reformulated by a combination of history and/or global forces. How these political and economic structural factors change over time is important as these changes also influence cultural change, which in turn can affect the ways that communities are governed and, by extension, both interpersonal and individual behaviours.

Changes in family formation, household structure, work-life balance, and child well-being are all interconnected and influenced by macro factors at the structural and institutional levels. The management of a family's well-being in circumstances of macro-level change can be challenging and, as the findings show, these vary depending on the country context. The risks and benefits to children offered by these changes can vary widely.

In the midst of a changing world economy it is difficult to predict exactly how the macro-economic transformations affect interpersonal violence, but patterns do emerge across the multi-country sites. National and social responses to economic change have a variety of impacts:

- Economic growth in Viet Nam and Peru appears to be fuelling opportunities for increased income but also a breakdown in traditional and extended family structures that previously protected children from harm, particularly in relation to migration.
- An economic crisis – in Italy or in Zimbabwe – can have very different impacts on the family and therefore on children's well-being.
 - In Italy, families have generally played a central role in the welfare of children, possibly in response to the State's failure. In light of declining fertility, this is a manageable prospect. However, this is likely to change as a growing population of displaced children are largely left with neither the state nor the family for protection.
 - In Zimbabwe, the tightly knit social fabric of the traditional or extended family structure has been negatively affected by chronic economic hardships combined with the assault of HIV/AIDS. Disrupted family structures leave children vulnerable and in situations where the psychological and physical well-being of boys and girls may be more at risk.

Structural Driver

Poverty is the shortage of income to satisfy food and other basic needs of a household or its individual members at any given point in time. Over time, poverty can be chronic or transitory. In terms of intensity, it can be moderate or extreme and, geographically, it can be concentrated or widely dispersed. Poverty disproportionately affects children globally: one out of two poor are children although they represent only one third of the population globally. And definitions of child poverty that go beyond monetary needs to include other well-being deprivations related to health status, education, nutrition or water and sanitation access, show even more concerning levels of multidimensional poverty across children.

Poverty

While economic transformations at the macro level can bring broad benefits to society, such as better health care, more access to education and a more vital market economy and opportunities for earning, these benefits are uneven and can generate increasing inequalities. Economic inequality means unequal access to wealth and income and, more often than not, increasing poverty that places considerable burdens on children.

Often, these inequalities can reduce governments' ability to react to shocks (Bourguignon, 1998)³⁶. Shocks can substantially rearrange household composition and children typically feel the effects.

36 www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/3876.pdf

Research shows an undeniably complex and often cyclical connection between poverty and violence (Parkes, 2015). People living in poverty and lacking economic power and resources are at greater risk of all types of violence as they eke out livings either near their homes or on the move (while migrating).

According to the World Health Organization's *World Report on Violence and Health* (2002), poverty increases one's vulnerabilities to exploitation in the workplace, schools and in the home (Krug, et al., 2002). In a review of violence against women, Jewkes (2002) notes that there are few social or demographic characteristics that actually determine risk groups for intimate partner violence, however, "poverty is the exception".³⁷

Italy

In Italy, the declining birth rate and greater tendency to condemn violence affecting children in Italian society have improved the well-being of most children; however, there are growing socio-economic inequalities. While the poverty rate in Italy is relatively low compared to other multi-country sites, children are disproportionately affected. In 2014, 7 per cent of the Italian population and 10 per cent of its children were living in absolute poverty (Istat, 2014).³⁸ Violence against children is most commonly experienced among the most vulnerable: the foreign born. One quarter (25%) of all immigrant families live in absolute poverty, compared to just 4 per cent of Italian families (Inequality Watch, 2012) and the fraction of foreign school children has quadrupled since 2001 (Istat, 2015b). Most of these enrolled children were born in Italy but their family culture may be quite different and, for some, the colour of their skin makes them vulnerable to bullying and social exclusion (Caravita et al., 2016).³⁹ The number of immigrants living in Italy has nearly tripled in the past decade (Di Rosa, 2014). Around 12,000 Nigerian girls or women arrived in Italy by sea in 2015 and 2016 and data from the International Organization for Migration shows a six-fold increase on the previous two years (IOM, 2016).⁴⁰ The majority of these women are involved in sex trafficking circles.

Peru

In Peruvian households, issues such as stress on principal caretakers, competition for living space, the need to recruit children as assistants in household tasks and caretaking, and the sheer discomfort of daily living under conditions of scarcity create household stress countrywide (Anderson, 2015). In Peru, inequality brings intensified issues of social class and separation. Social distancing is facilitated by differences in socio-economic status, race and ethnicity. The urban poor are concentrated in neighbourhoods that ring the large cities and that began as shantytowns on illegally occupied and densely populated land. Studies show that sexually exploited children tend to be poor, often Afro-Peruvian or mestizo, or from rural areas (ECPAT Peru, 2005; CHS Alternativo, 2014).

Viet Nam

Economic and social change in Viet Nam has brought increased economic stress, which can translate into individual and interpersonal stress—all of which can manifest within families, particularly those

37 <http://ethicsinhealth.org/wp-content/uploads/2012/01/intimate-partner-violence-jewkes.pdf>

38 The absolute poverty line represents the monetary value, at current prices, of a set of goods and services considered essential by Istat (National Statistics Institute) for each family, defined by age of the members, the geographic distribution and type of municipality of residence. A family is absolutely poor if it supports a monthly consumption expenditure which is equal or below that monetary value.

39 Simona C. S. Caravita et al. 'Essere immigrati come fattore di rischio per la vittimizzazione nel bullismo: uno studio italiano su caratteristiche individuali e processi di gruppo', *Maltrattamento e Abuso all'Infanzia*, vol. 18, n. 1, March 2016, pp. 59–87

40 <http://unitedkingdom.iom.int/>

living in poverty (UNICEF, CP Outcomes Paper, 2015). In Viet Nam, one third of the population – equivalent to about 30 million people – falls into the ‘poor’ or ‘near poor’ classifications. Economic liberalization here has widened disparities between rich and poor and between rural and city dwellers (Rubenson, Hanh, Höjer and Johansson, 2005; Human Rights Watch, 2006). Evidence shows that children of a certain class (directly related to their levels of poverty) are more likely to experience corporal punishment at school (Portela and Pells, 2015). Some studies based in Viet Nam indicate that with growing cities and increased work opportunities, poorer children may be enticed out of school to earn money to support their families, placing them at risk of labour and sexual exploitation (MOLISA and UNICEF, 2011; Pells and Woodhead, 2014; ILO and IPEC, 2002). It is estimated that 16 per cent of children age five to 17 years are involved in child labour, which presents risks of experiencing violence (UNICEF Viet Nam, 2014).

Zimbabwe

Zimbabwe, as previously noted, has suffered a downward spiral of increasingly erratic and often predatory government since independence in 1980. The situation has impeded government action to address children’s needs and placed enormous stress on poor families (Heritage Foundation, 2016).⁴¹ Levels of poverty reflected in ZIMSTAT’s 2012 poverty report show that, overall, 78 percent of Zimbabwe’s children in 2012 were considered poor or extremely poor (ZIMSTAT, 2012).⁴² The HIV/AIDS epidemic has increased the number of orphans, many of whom are at elevated risk of trauma, school dropout, neglect, child labour, physical abuse and stigma and discrimination (Nyamukapa et al., 2010).

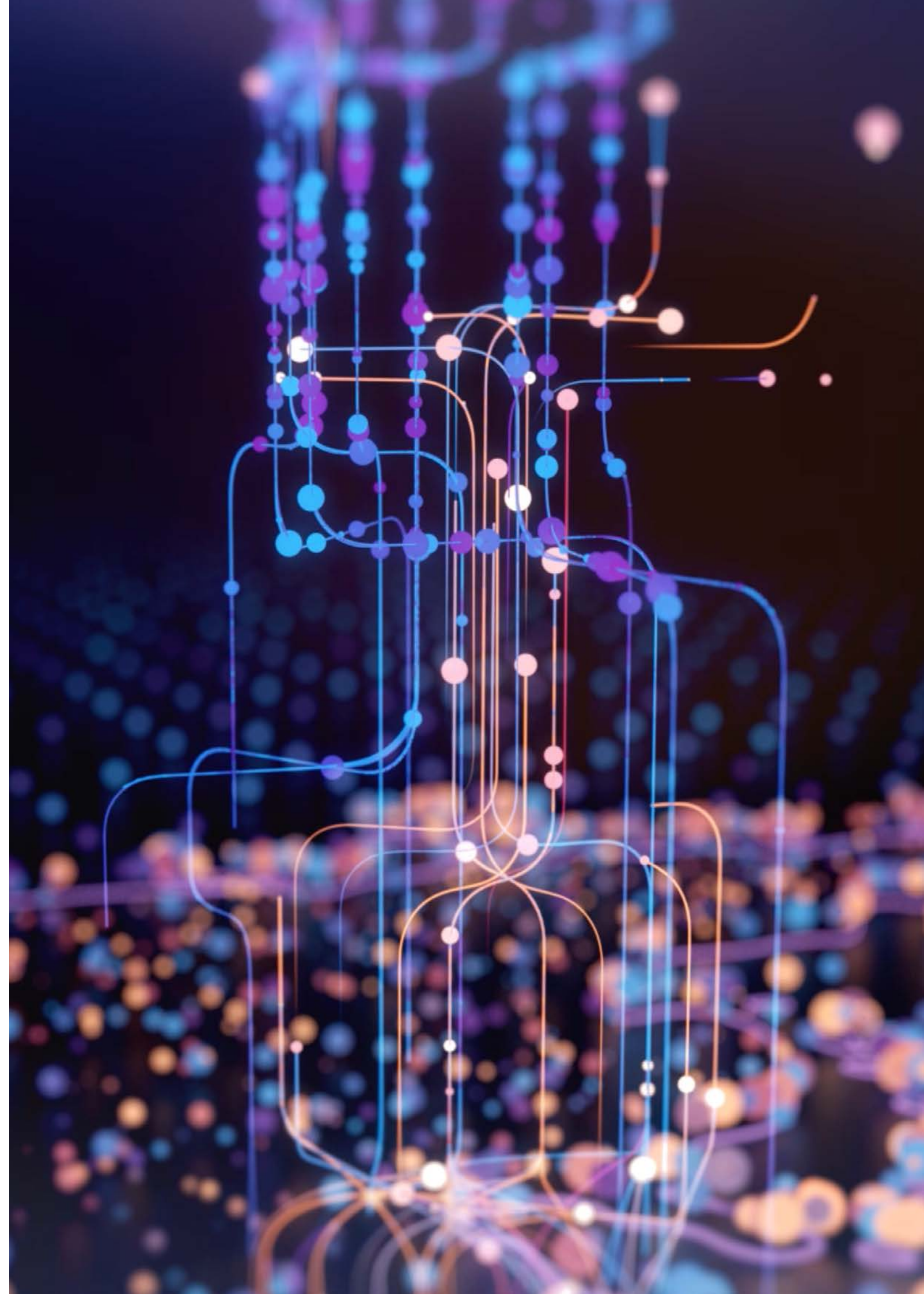
Poverty across all four countries

To develop to their full potential children need safe and stable housing, adequate nutritious food, access to medical care, secure relationships with adult caregivers, nurturing and responsive parenting and high quality learning opportunities at home and in school. Poverty and inequality – which affect children from all of the countries under this study – create instability in children’s lives, depriving them of these very basic needs, and this can be linked to increased risks of violence.

- In Zimbabwe, the only low-income country in the study, the conditions that create the likelihood of violence, such as the mix of poverty, urbanization and housing shortages, expose women and girls to violent acts including rape (Dube, 2013).
- As families feel pressure to cope with rising/falling living standards – in Peru, Viet Nam and Zimbabwe – children’s roles change and, in the case of falling standards, they become potential assets resulting in child labour and early marriage, both of which predispose young people to violence.
- Poverty affects communities and families in all countries (Krug et al., 2002). In Italy, the most developed country of all those included in the Study, the number of people living in poverty hit its highest level for a decade in 2015.
- In Italy, Peru and Viet Nam, the poor and extreme poor tend to be concentrated among ethnic minority groups and these groups are often more vulnerable to violence.

41 www.heritage.org/index/country/zimbabwe

42 www.unicef.org/zimbabwe/protection_14692.html



Structural Driver

Gender inequality and patriarchal norms are typically powerful, pervasive values and attitudes that are deeply embedded in social structures which institutionalize conceptions of gender differences.

Gender inequality and patriarchal norms

Because the manifestations of gender inequality can appear at various levels of the socio-ecological framework, including within households and families, communities and neighbourhoods, it can be difficult to disentangle which aspects of gender inequality drive violence. In the literature reviewed across countries, gender inequality appears to influence most directly the social roles of men and women, which are often reinforced by laws and institutions within a given society, squarely situating gender inequality and norms as factors that reinforce or drive violence. Boys and girls observe and experience these differences and expectations, which filter down from the macro or structural level to create the power and resource imbalances that often define how men and women are treated in their homes and communities. In this way, gender has profound influences on interactions at the community, interpersonal and individual levels (WHO, 2010).⁴³

Italy

Italian women have made some strides in terms of gender equality, especially since the 1970s—a time period referred to as part of the second wave of feminism. In spite of these small gains, Italy lags behind the rest of Europe, ranking among the lowest of all European countries according to the European Gender Equality Index in 2015.⁴⁴ According to the UN Special Rapporteur on violence against women who visited Italy in 2012, “[Italian] women carry a heavy burden in terms of household care, while the contribution of men thereto is amongst the lowest in the world.” Related markers of gender inequality are reflected in the violence statistics: about one in seven women in the country has suffered physical or sexual violence at the hands of a partner or ex-partner in the course of her lifetime. In some regions, the figure is closer to one in five.

Gender equality, according to Zaczek and Borlini (2011), also remains out of reach for younger women, particularly in the context of Italy’s persistent economic crises and the concomitant job insecurity, unemployment and resulting pressures inside and outside the household. Studies demonstrate how the reinforcement of gender inequality occurs early in young women’s lives (Piconne-Stella and Saraceno, 1996). At least one study links patterns of violence against women to a general discourse linked to patriarchal roles first experienced in the family and then reinforced during the early education years when gender norms are consolidating (Biemmi, 2010). This is further reinforced by the Italian education system and gender-biased pedagogy used during primary school (Ulivieri, 2014).

⁴³ World Health Organization, *Preventing intimate partner and sexual violence against women: Taking action and generating evidence*, WHO/London School of Hygiene and Tropical Medicine, Geneva, 2010.

⁴⁴ “The structure of the conceptual framework of the GEI consists of eight domains, the first six (work, money, knowledge, time, power, health) being combined into a core index, complemented by an additional two satellite domains (violence and intersecting inequalities).” (Humbert, Ivaškaitė-Tamošiūnė, Oetke and Paats, 2015, p. 11)

Peru

In Peru, the gender order is considered ‘elastic’ but contains strong elements of Catholic conservatism and Mediterranean machismo (Pinzás, 2001; Fuller, 2001). The ‘masculine’ trait of physical strength is still highly valued⁴⁵ while the growing independence of women and their subsequent empowerment, coupled with fathers’ non-involvement in many children’s lives, creates clashes. While women’s roles may be changing, nearly 78 per cent of working women are in informal work, without social security, annual leave, maternity leave or breastfeeding breaks, and without health coverage or occupational pensions.⁴⁶ Violence, particularly against women and children, serves to reinforce gender identities in Peru through power relations, prestige hierarchies, access to resources, symbols and displays of gender and generational identities. More than one in three Peruvian women suffers from some form of domestic violence (INEI, 2013). Very young children are subject to highly gendered processes: for many boys, socialization explicitly links violence to male gender identity. As children acquire social experience, they may use violence, along with other tools, to position themselves and affirm their membership in desirable groups—such as the wealthier kids in a neighbourhood or the lighter-skinned kids in a school (Anderson et al., 2016).

Viet Nam

Gender roles in Viet Nam are changing, though at different speeds in different social layers. Although patriarchy remains strong in Viet Nam, women now have greater decision-making power within the family than in the past, in part reflected by an increase in the number of female-headed households. Since the 1960s, these traditional values about gender inequality and patriarchal norms have been challenged by socialist ideologies of equality and, since Doi Moi, women have experienced greater economic opportunities. Exposure to global social movements has also influenced gender equality. Yet, state socialism still splits men and women divisively with gender Peasant unions, thereby encouraging a view that women are not farmers and therefore may not be directly involved in economic change—even though women (and girls) perform up to 80 per cent of field work (CCIES, Pastoetter, 2004).

New laws on gender equality, stronger sanctions against domestic violence, and the expansion of education and employment for women have contributed to changes in the nature and constellation of the Vietnamese family. Yet, family relationships continue to be influenced by patriarchy and traditional notions of male and female roles within the family (Dao The Duc et al., 2012). Far from representing a clear picture, gender roles are loaded with contradictions. Violence is common. The lifetime prevalence of physical and/or sexual partner violence was 34 per cent, and 54 per cent of women had experienced emotional abuse in their lifetimes. Women of Kinh, Muong and Hoa ethnicity faced the highest rates of gender-based violence (GBV).⁴⁷

Similar cultural attitudes, beliefs and practices also contribute to children’s vulnerability to sexual abuse and exploitation. These include: gender inequality, hierarchical parent-child relationships and acceptance of male infidelity (GSO, 2010; Cappa and Dam, 2013; Dao The Duc et al., 2012; GSO, UNICEF and UNFPA, 2011; United Nations and World Bank, 2005; Pells, Wilson and Hang, 2016); as well as a strong emphasis on female virginity, family honour and community reputation, and girls who are raped often being blamed for it (GSO, 2010; Australian Aid and World Vision, 2014; UNICEF,

⁴⁵ See for example: Rojas, V. “*Prefiero que me peguen con palo ... las notas son sagradas*”. *Percepciones sobre disciplina y autoridad en una secundaria pública en el Perú*. Lima: GRADE / Niños del Milenio, Lima, Documento de Trabajo 70, 2011.

⁴⁶ www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=15079&LangID=E

⁴⁷ www.who.int/sdhconference/resources/draft_background_paper4c_viet_nam.pdf

2010a). This contributes to a culture of silence and denial (MOLISA and UNICEF, 2011; Private Sector Partnership, 2014).

However trends are difficult to decipher. For example, early marriage remains far more common among the Hmong (an ethnic minority) than it does in the wider Vietnamese population; some of these marriages, particularly in more isolated villages, continue to be the result of abduction. A pervasive cultural preference for sons means that gender norms surrounding Hmong marriage practices are shifting only slowly and often in unexpected ways, despite legal changes and strong community awareness raising efforts (ODI, 2014).⁴⁸

Zimbabwe

Zimbabwe is a predominantly patriarchal society where men hold the positions of power, serving as the head of the family unit, leaders of social groups, managers in the workplace and heads of government (Ratele, Kopano 2011; Connell 1995). These ideologies are also reflected in the economy, with women representing the vast majority of those labouring in the informal economy.⁴⁹ The imbalance of power between women and men drives violence perpetrated against women and girls (Mashiri, 2013). In many ideologies, traditional legitimacy is given to using violence against women. In Masvingo, for example, there are cultural sanctions for husbands to beat their wives in certain circumstances (Zimbabwe Human Rights Commission, 2014).

In Zimbabwe, custom, tradition and religion are habitually invoked to rationalize the use of violence against women. Gender socialization in Zimbabwe begins early in life and girls are at an early disadvantage, notably in rural areas and due to ‘son preference’. This often results in harmful beliefs and practices. For example, girls are looked at as property where their virginity makes them more valuable; boys’ virginity is never questioned (Hodzi, 2014). This value is further reinforced through early marriages. A government study in 2014 showed that 32.8 per cent of girls were married off before the age of 18 compared to 8 per cent of boys (ZIMSTAT, 2014). *Lobola*, or bride price, widely practiced throughout Zimbabwe, is used to curb poverty. This inequality is reflected in violence statistics with nearly one third of girls experiencing some form of sexual violence before the age of 18 years (NBSLEA).

Poverty, combined with gender inequality, is often cited as the reason for marrying off young girls (Machingambi and Wadesango, 2010; Hodzi, 2016) but this structural driver does not act alone, rather it exacerbates cultural, religious and traditional practices that condone certain types of violence (Mashiri, 2013; Girl Child Network, 2005). For example, the traditional practice of *chiramu*, where an elder sister’s or aunt’s husband can fondle or force sex with the younger sister or niece, increases girls’ vulnerability to abuse.

Child marriage is also common practice in indigenous apostolic churches, charismatic evangelical groupings which mix Christian beliefs with traditional cultures and have approximately 1.2 million followers across the country. The Zimbabwe Council of Churches and the Apostolic Christian Council of Zimbabwe acknowledge that the practice is more prevalent among apostolic followers than other religious groups. Here the church doctrine requires girls to marry between ages 12 and 16 to prevent sexual relations outside marriage. According to a Human Rights Watch Report in 2016,⁵⁰ as soon as a girl reaches puberty, any man in the church can claim her for his wife.

48 www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/9182.pdf

49 www.solidaritycenter.org/zimbabwe-women-workers-key-to-making-workplace-rights-a-reality/#sthash.FLiUfTwC.dpuf

50 <https://www.hrw.org/news/2015/11/25/zimbabwe-scourge-child-marriage>

Gender inequality across all four countries

Gender inequality is a result of the persistent discrimination of one group of people based upon socially ascribed roles aligned with biological sex. As the findings show, this manifests differently depending on a variety of cultural, religious and political factors. The perpetration of violence against women and children is one way that this inequality is expressed as a manifestation of historical, sustained unequal power relations between men and women.

- In all four countries, gender equality goes beyond economics and women’s integration into a society’s economy. Less tangible factors such as the relative social status of unequal groups, social norms and attitudes are also important.
- A relevant and measureable consequence of gender inequality is GBV, including sexual violence, coercion, emotional and/or physical violence perpetrated by intimate partners and non-partners alike. Women across all four countries suffer disproportionately higher rates of GBV than men.⁵¹
- In all four countries, the gender socialization of children – or the process of learning social expectations about appropriate practices for men and boys, women and girls – shapes the concomitant expectations and experiences of power later in life. These are reinforced by policies, societal beliefs and practices in schools and in the home.
- In Peru, Viet Nam and Zimbabwe, cultural traditions place the girl-child at risk of increased violence—as reflected in deeply held patriarchal values.
- Harmful gendered beliefs and/or doctrines (reinforced by social or religious institutions) appear across countries, though in varying degrees, putting children at risk of violence.

Structural Driver

Child migration (sometimes referred to as ‘children on the move’) is the movement of people aged 3–18 years within or across political borders, with or without their parents or a legal guardian, to another country or region. They may travel with or without legal travel documents and they may arrive in their new destination as refugees, asylum seekers or economic migrants.

Migration

The literature on migration tends to focus on adult migration, underplaying how migration affects, and is undertaken by, children (Capaldi, 2017). Children are affected by migration in different ways: they are left behind by migrant parents; they are brought along with their migrating parents; and they migrate alone, independently of parents and adult guardians. Other children do not move, but are nevertheless affected because they live in communities that send or receive large numbers of migrants.⁵² In all four countries of this Study – Italy, Peru, Viet Nam and Zimbabwe – migration plays an important role that contributes to children’s experiences of both protection from and vulnerability to violence (Di Rosa, 2014; Leinawaver, 2010; Anh et al., 2012; Chiliya, Masocha and Zindiye, 2012).

Migration, like rapid societal change, can have both positive and negative implications for children depending on the context and including whether the change is voluntary, planned in advance,

51 See for example the recently revised IASC GBV Guidelines: <https://gbvguidelines.org>

52 www.unicef-irc.org/knowledge-pages/Migration-and-children

and moving the individual or family to better circumstances.⁵³ Migration appears, at least in the literature, to be primarily linked with *instability*, that is, where the change in individual or family circumstances is abrupt, forced and/or in a negative direction. As such, it is more likely to have adverse implications for children (Rushing, Watts and Rushing, 2005; Save the Children Norway Zimbabwe, 2010).

Italy

From the 1990s on, and especially during the past five years, Italy has also transitioned from a country of emigration to immigration (Di Rosa, 2014) due to an increase in people migrating and seeking asylum, many driven from their home countries by war and extreme poverty. The number of lone children applying for asylum in Italy has increased steadily in recent years—although official statistics and those captured by international and local agencies working on the ground are vastly different. In 2015, just under 12,000 unaccompanied children were registered in Italy; however, Save the Children has documented 23,000, that is, nearly twice as many (Save the Children, 2015).⁵⁴ These children on the move are at very high risk of violence. Most are adolescents aged 16–17 years and the overwhelming majority (95%) are young African males sent by their impoverished families to earn money and send it home. A smaller number of girls, mainly from Africa, arrive as part of criminal networks of sexual exploitation. In 2016, the number of children travelling alone without their parents and arriving in Italy had more than doubled compared to the same period in 2015. The majority of these unaccompanied children are from Egypt, Eritrea, Somalia, Gambia and Guinea.⁵⁵

Peru

Between 1940 and 1980, a massive shift in population from the Andean cordillera to the cities and towns along the Pacific coast transformed Peru from a predominantly rural society to a largely urban one. Prompted by upheaval in the agricultural sector and the growth of industry, trade and services in the cities that initially provided jobs, this internal migration and the building, industrializing and provisioning of such coastal cities as Lima, Trujillo, Chiclayo, Piura, Tacna, Ica and Chimbote account for the dynamism of the economy over most of the twentieth century. The population living in Lima’s metropolitan area has risen from 800,000 persons in 1940 to 9 million today, or 76 per cent of the total population. Varying degrees of economic opportunity within Peru⁵⁶ promote a process of constant migration at both the national and international level (Carrasco, 2010; Leinaweaver, 2010; Ansi3n et al., 2013) with the main objective of improving the family situation in economic terms (Ansi3n, 2013). Over half of all Peruvians who migrate abroad are women and they go mainly to jobs as domestic workers or caregivers for children or the elderly. This pattern of feminization is also seen within internal rural-to-urban migration (INEI, 2009).

Leinaweaver (2010) shows how internal migration leads to an empty space in the family (“care slot”) that may be filled through different strategies. In Ayacucho – a region of Peru located in the south-central Andes of the country and hardest hit by terrorism of the 1980s – the sense of community responsibility for children has diminished and otherwise abandoned adolescents have been lured into gangs, which may provide a sense of family (Vergara Figueroa, 2008, p. 178). Rates of child

53 The definition in the text box above is from: Van de Glind, Hans & Kou, Anne, *Migrant Children in Child Labour, A vulnerable group in need of attention*, International Organisation of Migration, *Children on the Move*, pp. 27–43, p. 30.
 54 www.hrw.org/news/2016/06/23/italy-children-stuck-unsafe-migrant-hotspot
 55 <http://www.lavoro.gov.it/temi-e-priorita/immigrazione/focus-on/minori-stranieri/Pagine/Dati-minori-stranieri-non-accompagnati.aspx>
 56 Peru is commonly and casually referred to as three countries within one: the coastline, the mountains and the jungle.

sexual abuse are especially high in Peruvian mining centres like Cajamarca (IPEC, 2007b) as well as along migration routes, at tourist attractions and in lawless zones such as gold rush towns in Puno and Madre de Dios (Mujica, 2014). Some Peruvian children are also caught up in international networks of sex trafficking. Peruvian girls have been found in the sex trade in Miami, Ecuador, Argentina and Chile. Similarly, adolescent girls from Ecuador, Bolivia, Chile, Japan and other countries have been found engaged in sex work in Peru (IOM / Movimiento El Pozo, 2005).⁵⁷

Viet Nam

Viet Nam initiated a series of reforms (Doi Moi) to open the country in the mid-1980s and create a 'socialist-oriented market economy'. These included loosening some migration restrictions, which led to a marked increase in both internal and international migration. Rapid urban migration has led to diminished community cohesion and traditional values, increased commercialism, and changes in the nature of social relationships—all of which pose new opportunities for and threats to children's well-being (UNICEF, 2010a; Rydström, 2006b; Emery, Trung and Wu, 2013; Save the Children, 2005; CSAGA, 2004; Tran Thi Minh Thi, 2015).

The feminization of internal migration has significant implications for the well-being of mothers and their children (Anh et al., 2012). Over half of all people migrating were under the age of 25 years and women currently account for a much larger proportion of those migrating than in the 1980s. Registration status and access to social services once migration is completed is especially acute for some particularly vulnerable groups such as migrant children, women or families with children, as they have little or no access to formal support structures and are separated from social networks they may otherwise have relied on.⁵⁸

There is limited information on the number of people trafficked in Viet Nam, especially women and children, and on the means by which they are trafficked. In some instances, what was intended as a move to undertake voluntary labour or marriage ends up as prostitution and other forms of sexual exploitation.⁵⁹ MOLISA indicates that there are virtually no statistics on boys who are trafficked.⁶⁰ There is also little evidence in Viet Nam of the exact number of children under 18 years of age who are independently migrating, such as those who move away from their families to take up employment in factories, in agriculture or as domestic workers. In one study, 46 per cent moved away to earn money (Rushing, Watts and Rushing, 2005).

Zimbabwe

Zimbabwe's ongoing economic crisis has greatly increased migration both within and outside the country (Zanamwe and Devillard, 2010). Migration tends to be a highly gendered experience and Zimbabwe stands out as the country with by far the highest proportion of migrants who are female, at 43.6 per cent.⁶¹ Most leave their children behind with relatives, but this informal safety

net can pose risks for some children, especially when they lose regular contact with their parents. Urbanization, which often accompanies migration, is a potential risk factor for children and is on the rise (Bray and Dawes, 2016). Statistics pertaining to illegal child migrants are difficult to obtain because of the clandestine nature of illegal border crossing. Nevertheless, figures released show that the mean age of children crossing from Zimbabwe to South Africa was 14 years, with some as young as seven travelling alone. Save the Children reported that registering child migrants is challenging because of the child's fear that they may be "caught, arrested and deported" (Save the Children Norway Zimbabwe, 2010). For several years now, criminal gangs called 'Magumaguma' and 'Mareyanes' have been operating at border sites where they abuse vulnerable children (Save the Children, 2008; Chiliya, Masocha and Zindiye, 2012). Reasons given by the children for their travel ranged from the death of their caregivers and/or parents to poverty (Save the Children Norway Zimbabwe, 2010).

Migration across all four countries

People may migrate for political, economic, social and/or environmental reasons and some choose to migrate while others are forced. The changing home environments – with varying and often shifting parental and caretaker support – rob children of the stability needed to support positive development. This, coupled with new family constellations and poor integration into new local communities, which often lack consensus around rejecting and sanctioning violence against children, can make children vulnerable to violence.

- In Italy, migration is largely international in scope—the majority of people washing up on Italian shores are escaping conflict in parts of Africa and the Middle East. As these trajectories continue, the number of unaccompanied children entering Italy also increases. High levels of sexual violence have been reported among unaccompanied minors and women in and near their points of entry.
- In Zimbabwe, children also move across international borders regionally within Southern Africa in search of economic opportunities. What actually pushes children from their homes remains understudied but includes poverty and loss of family members (for example, due to HIV/AIDS).
- In Peru, Viet Nam and Zimbabwe the internal migration of children from depressed rural areas to urban slum communities is creating rapid urbanization and a host of challenges for newly settled families and children.
- Migration in Peru, Viet Nam and Zimbabwe is gendered with the 'feminization' of migration documented in each country.

⁵⁷ Information about the dimensions of human trafficking in Peru, whether of children or adults, depends almost entirely on raids carried out at houses of prostitution, employment agencies and clandestine businesses involved in trafficking chains. For this reason, it is anecdotal and undoubtedly underestimates the scope of the problem. See also CHS Alternativo, which has a web page and monitoring project.

⁵⁸ http://vietnam.unfpa.org/sites/default/files/pub-pdf/7_Monograph-Migration-Urbanization.pdf

⁵⁹ 'Living the reality of forced sex work: perspectives from young migrant women sex workers in northern Vietnam', *Journal of Midwifery & Women's Health*, vol. 50, no. 4, e41-e44. [GIRLS, ages 16–27]; [48] In Viet Nam, frequent changes of residence due to migration is a risk factor for emotional violence, see for example: Loughry, M. and E. Flouri, 'The behavioral and emotional problems of former unaccompanied refugee children 3–4 years after their return to Vietnam', *Child abuse & neglect*, vol. 25, no. 2, pp. 249–263.

⁶⁰ See 8 pager

⁶¹ http://papers.ssrn.com/sol3/papers.cfm?abstract_id=2250178; <http://scholars.wlu.ca/cgi/viewcontent.cgi?article=1121&context=samp>

Institutional drivers across the four countries

Institutional factors relate and interact closely with the structural factors that appear to drive violence in a given society. These include rules, norms and routines that guide behaviour and become institutionalized either formally or informally, ensuring that laws and policies formulated within institutions are in turn influenced by norms and culture. Institutional factors serve to uphold many of the structural drivers of violence described above, yet they also have the power to influence positive and protective change.

The three most common institutional drivers identified in the literature across the country sites include: weak or ineffective child protection systems, weak or ineffective legal structures, and poor school governance. These are not the *only* institutional drivers but they are the main factors that appeared consistently across the four countries under study. Institutional drivers may interact with each other as well as with structural drivers, making the work of coordination absolutely critical to effectively preventing violence. Often, institutional drivers are those laws and systems that fail to sufficiently protect children and prevent violence.

Institutional Driver

A **formal child protection system** refers to those structures that have been established specifically to play a role in protecting children, with or without legal mandate for their operations.

An **informal child protection system** refers to endogenous child protection practices and measures undertaken by communities, families and/or children themselves for assistance, provided as a first resort, an alternative or in addition to formal services, based on cultural norms, traditions and social practices.

Weak or ineffective child protection systems

Some of the main reasons for weak or ineffective child protection systems identified by the Study include lack of a fully resourced social service workforce; challenges in linking formal and informal child protection systems; failure to coordinate across institutions; and scarcity of systematic, reliable and complete child protection data. Defining a 'system' varies even within the field of child protection.

Formal and informal child protection systems should be understood as representing two ends of a continuum, with elements that may overlap. Formal child protection systems may include government agencies, international organizations and local NGOs (including community- and faith-based organizations) involved in providing child protection, where these entities are officially recognized, endorsed and/or subject to supervision and regulation by the national government. Some groups, such as traditional and religious leaders, may also have clear roles within the formal system. An informal system might include community members, adults and often children. It can be challenging in some contexts to clearly define specific components due to ambivalent roles and mandates. Elaborating the nature of the relationship between these systems represents an important area of research, with much learning from low income and humanitarian contexts.⁶²

Lack of a fully resourced social service workforce

Lack of a social service workforce limits the human resource capacity within child protection systems to prevent and respond to cases of abuse, and may limit the scope within which institutional actors see themselves accountable.

In **Peru**, NGO personnel have complained about deficiencies in the professional competence of many persons working in the field, uncompetitive salaries, and working conditions that drive away experienced and effective personnel. Interventions are less likely to directly address violent inter-familial dynamics, in part because the absence of a well-developed cadre of social workers makes it riskier to intervene. Further, referrals to and from police, hospitals and temporary refuges are problematic due to lack of financial and human resources and insufficient infrastructure.

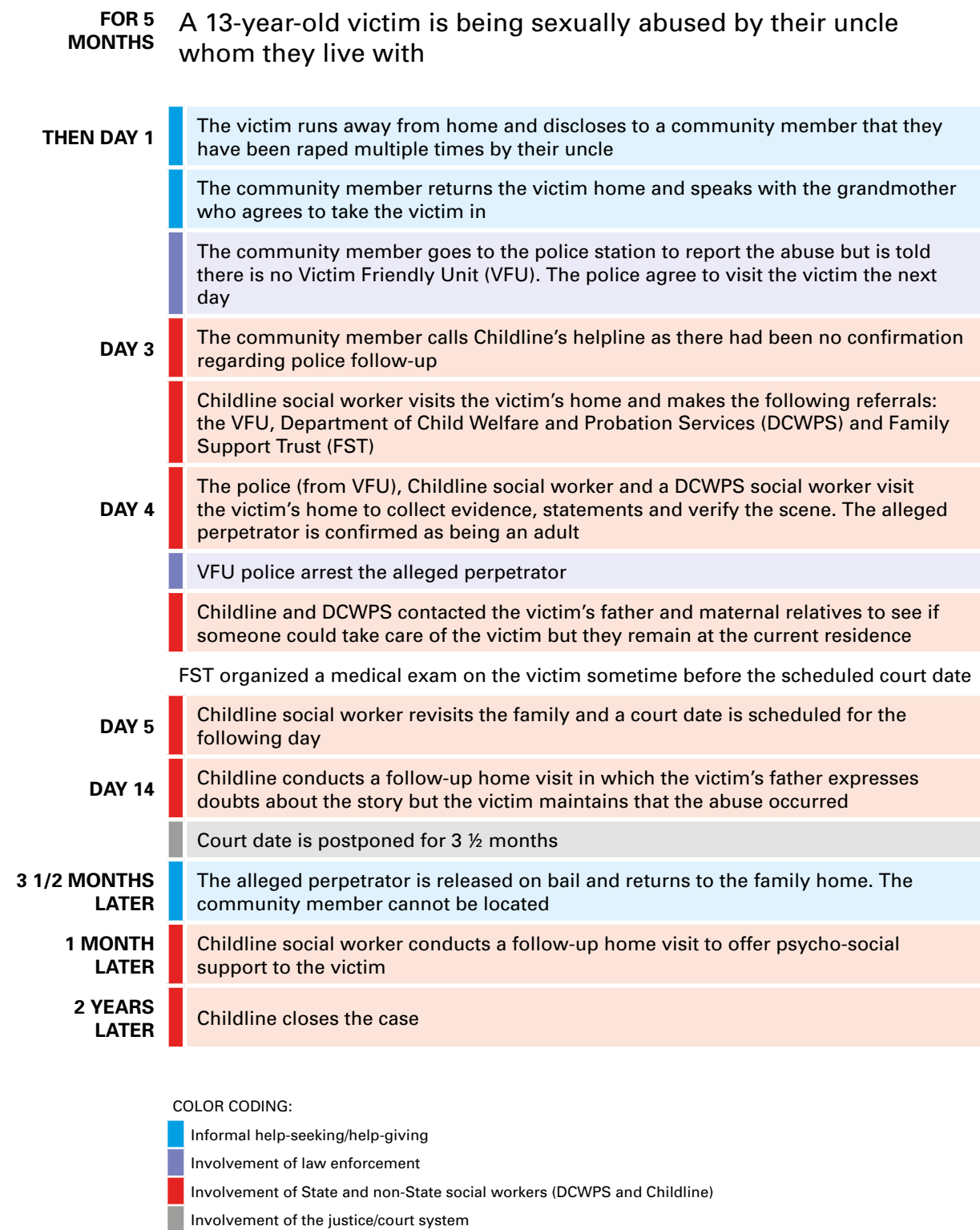
Responding to child protection needs is a multi-sectoral endeavour—engaging the formal and informal systems of protection. Referrals to key service providers, such as the police and judiciary, are dependent on their availability as well as the speed and quality with which they respond. The **Zimbabwe** NBSLEA reveals that coverage of services to respond to violence against children in Zimbabwe is very limited. Children who face violence and come into the child protection system are often further mismanaged by a series of human and infrastructure obstacles (*see Figure 9*) with, for example, only 15 law officers, most with less than five years experience. Trials involving child sexual abuse should be handled within three days but are stalled for a variety of reasons.

A closer look: Social services in Viet Nam

Social work was not developed as a profession in Viet Nam until recently and there are few dedicated, professionally qualified staff working in child protection, particularly at the district and commune levels. The government has taken measures to address this gap through the National Project on Social Work Profession Development (2011–2020), which aims to build a network of 60,000 skilled social work professionals and para-professionals. The government has also established provincial-level social work centres throughout the country, children's advisory offices at the district level, and community and school advisory points. These centres, a relatively new initiative, offer counselling services for children and families, including services for children who are at risk of or who have experienced abuse, exploitation, violence and neglect (BCCP, 2015). However, the distribution of these services is inconsistent and they have not yet been evaluated.

⁶² www.unicef.org/wcaro/english/strengthening_child_protection_systems_in_sub-Saharan_Africa_-_August_2012_.pdf
www.cpcnetwork.org/wp-content/uploads/2014/04/Final-Report-Child-Protection-Systems-Mapping-Liberia-Kiryn-Lanning.pdf
<https://resourcecentre.savethechildren.net/library/mapping-and-assessment-formal-and-informal-child-protection-structures-systems-and-services>
www.sciencedirect.com/science/article/pii/S0145213415001246

Figure 9: Zimbabwe, a ‘call’ to justice



Source: The University of Edinburgh (UoE), ‘Childline Zimbabwe and UNICEF Zimbabwe. A Case Study of Referral Pathways: Childline Zimbabwe’, UNICEF, Harare, 2016.

Despite progress, **Viet Nam’s** child protection system remains underdeveloped and is not fully resourced for addressing the complex and interrelated drivers behind violence against children. A largely voluntary system of child protection, the shrinking extended family support system, increasing economic migration and new threats such as trafficking, call for an urgent strengthening of the institutions of child protection. These would include a cadre of trained social workers at district and commune levels who are dedicated to preventing and detecting violence against children and contributing to the provision of more uniform prevention, referrals and services throughout the country.

In **Italy**, unevenly distributed resources underlie regional differences: according to the National Survey of Child Maltreatment (CISMAI and TdH, 2015), children in northern Italy are twice as likely to receive services of some kind as children in southern Italy (6.3% versus 3%), and one third more likely to receive services as children in the central region (4.4%). This geographical discrepancy reflects discrepancies in resources available, and Italy’s current economic challenges are likely to further affect formal social welfare services as they are rationalized and streamlined. This comes at a time when an increased number of vulnerable children are migrating to Italy—many fleeing deprivation or war. Arrivals of unaccompanied and separated children increased 24 per cent between January 2016 and January 2017, with 97 per cent of the 820 children arriving in Italy by sea in January 2017 being unaccompanied.⁶³ In addition, there is a lack of information about marginalized children such as Roma or those identifying as LGBTI who may be more vulnerable to certain types of abuse, and/or face more barriers to accessing child protection services.

Challenges in linking formal and informal child protection systems

When formal child protection systems fail to link with informal or community-based mechanisms of protection, children may fall through the cracks. **Viet Nam** is an example of relatively strong linkages due to a tradition of ‘mass organizations’ that stretch from national down to village level and are highly networked. For example, village leaders and the heads of local mass organizations organize awareness and education campaigns; mobilize financial and material support for families in times of crisis; conduct family mediation, counselling and civic education; and sometimes temporarily take women and children escaping abuse into their homes (ECPAT International et al., 2014; MOLISA and UNICEF, 2010). However, there is a lack of trained child protection officers at the district and commune levels who are dedicated to the task of guiding and mobilizing these community efforts and ensuring appropriate case management and intervention when cases of violence against children are detected.

In **Zimbabwe**, information from the national case management system suggests that informal institutions, including community volunteers, play a critical role in identifying and responding to violence against children. The success of violence prevention efforts depends substantially on the ability of the informal and formal sectors to work together through community and state-enforced institutions. As of May 2016, there were over 9,000 trained Community Childcare Workers across the country and the three key strategies of prevention, early detection/interventions, and referrals/ response depend upon them. Although coordination mechanisms and guidelines exist from central government to the community, their effectiveness has been blunted by inadequate resources, limited human, financial and infrastructure capacity, and an inadequate culture of whole-of-government coordination.

63 <http://reliefweb.int/report/italy/italy-unaccompanied-and-separated-children-uasc-dashboard-january-2017>

‘Informal’ systems often rely on a network of supportive adults; institutionally supported programmes can help more adults to take on this role. **Peru** has many decades of experience with interventions that encourage local communities to focus on children’s needs and help adults become more aware of their own violent and negligent behaviours. Since the 1970s, this has been a central tenet in the education ministry’s non-formal early childhood education programme known as PRONOEI. Applying a similar indirect strategy, an NGO working with communities in the highlands (TADEPA) seems to have reduced violence against children in Cangallo, a province in Ayacucho (Ames, 2013). Supportive adults are vital members of community-based mechanisms and are crucial in making the link with formal civil society or government institutions. This is also true for children themselves meaning that formal actors must be careful not to sideline or, conversely, overwhelm them.

While **Peru** has many laws to protect children against violence and deliver treatment and care to those affected, traditional systems of protection are linked to under-reporting due to shaming and sanctioning of violent behaviour. Further, bureaucratic institutions are not always trusted and often fail to connect with customary social networks of both children and their caretakers. Other reasons abuses go unreported include stigma, lack of access (whether geographical, such as living in a rural area,⁶⁴ or due to other forms of marginalization such as lack of an ID card⁶⁵), and retaliation by aggressors.⁶⁶

In **Italy**, systematic referral mechanisms for immigrants and asylum seekers, especially for victims of trauma, trafficking, GBV and torture, are lacking. Many people seeking asylum (i.e. official recognition as refugees) avoid identification because they consider Italy a transit country, making it even harder for them to access services.⁶⁷ Irregular migrant women with poor language skills are less likely to report abuse when it occurs, almost certainly because they fear that their immigration status will be reported to the authorities (Caso et al., 2011).

Failure to coordinate across institutions

Different types of violence tend to be handled by different programmes and agencies, preventing a coordinated response to the overall problem. This is often exacerbated by the human and other resource constraints noted above. In **Peru**, NGO personnel have complained of the lack of continuity in government programmes and priorities, and the veto power of the Ministry of Economy and Finances over public investment. Peru’s child protection system is centralized, heavy on laws and light on services and enforcement.

64 Child protection services are concentrated in cities and have a very meagre presence in rural, indigenous and frontier areas where some of the most vulnerable people live (Anderson & Palma, 2014).

65 Violence may be concentrated among families that are disconnected from services, community networks and social support (Cuenca & Díaz, 2010). Lack of an ID card or DNI (Documento Nacional de Identidad) as a marker for marginalization is common in rural areas and strongly associated with the child’s mother tongue not being Spanish.

66 When people do seek help, they tend to consult churches, health centres and local police (Bardales and Huallpa, 2005). According to crime data published by the National Office of Statistics and Informatics (INEI) in the special monthly bulletin on public safety, 20 per cent of sexual abuse victims who do not report it cite fear of retaliation by their aggressors as the reason; 16 per cent consider it a “waste of time” (INEI, 2015).

67 Children of immigrants may also be a vulnerable group, potentially more prone to exploitation, abuse and discrimination than others. According to a Cismai and Terre des Hommes study (2015), foreign children are twice as likely to be assisted by social services due to maltreatment compared to ethnic Italians. Ensuring that effective assistance reaches them is critical. At present, systematic referral mechanisms for immigrants and asylum seekers, especially for victims of trauma, trafficking, gender-based violence and torture, are lacking. Many people seeking asylum (i.e. official recognition as refugees) avoid identification because they consider Italy a transit country, making it even harder for them to access services. <http://reporting.unhcr.org/sites/default/files/UNHCR%20Update%20%2310%20on%20the%20Emergency%20Response%20in%20Europe%20-%206-12NOV15.pdf>

In **Zimbabwe**, a recent analysis (UNICEF and Government of Zimbabwe, 2011) of the child welfare and justice system noted the country has a strong legal and policy framework but accountability is fragmented as child protection responsibilities cut across the mandates of different government ministries. Outside these public institutions, parents, guardians and other adults, as well as traditional, religious and community leaders also have duty-bearing responsibilities regarding child protection. Coordinating all these bodies in an effective child protection system is a major challenge.

In **Italy**, social services for children are provided mainly by municipalities, which receive support from a number of regional and national ministries including Labour and Social Policies, Education and Health and the Department for Equal Opportunity. An expanding body of evidence is examining the linkages between violence against women and violence against children, which necessitates further cross-sectoral institutional responses. This works well in Italy where social services are expected to intervene in cases where a child witnesses domestic violence against a parent or other figures close to her or him—based on the knowledge that such abuse carries potentially long-term negative psychological and behavioural consequences for children (Sousa et al., 2011).

Scarcity of systematic, reliable and consistent child protection data

As discussed above, under-reporting is one reason systematic, reliable and consistent child protection data is scarce. Further, the variety of institutional actors involved makes it harder to define accountability for data collection, sharing, synthesis and analysis.

In **Italy**, bureaucratic issues relating to data (and funding with large discrepancies between Northern and Southern Italy) are problematic—no single region uses the same indicators, making it virtually impossible to compare data. In **Peru**, various government agencies compile statistics on violence including the division of epidemiology in the Interior Ministry, the Ministry of Health, the Ministry of Women and Vulnerable Populations (MIMP, which collects data on cases referred to the National Programme against Family and Sexual Violence), the national police (who publish an annual report on crime, the *Anuario Estadístico*) and the National Institute of Statistics and Informatics (INEI), which produces a yearly *Statistical Compendium on Peru* as well as specialized surveys.

Laws may have unintended consequences in terms of obscuring data linked to child protection issues. For example, in **Zimbabwe**, statistics pertaining to illegal child migrants are difficult to obtain because of the clandestine nature of illegal border crossing. Nevertheless, figures released in 2008 showed that the mean age of children crossing from Zimbabwe to South Africa was 14 years, with some as young as seven years travelling alone (Save the Children Norway Zimbabwe, 2010).

Evaluations are often inconsistent or missing, which is both a cause and effect of scarce data. Interventions mappings identified only 10 child protection interventions as being effectively evaluated across the four countries. In **Viet Nam**, there is a lack of research on the extent to which current approaches have been successful in reducing violence against children. Communication and advocacy activities are often event-based, such as the International Day of Children, and not sufficiently sustained to address entrenched harmful social norms relating to children (ECPAT International et al., 2014). Even when data is available, it can be confusing to know how to act on it—an issue addressed in the next section of this paper.

Under-resourced child protection systems across all countries

Across all four countries, protecting children remains, to varying degrees, an under-resourced endeavour. This in turn affects and is affected by the amount and quality of training or education, overall professionalism and other workforce issues. In Italy, where the 'system' is comparatively robust, child protection services are undergoing cuts aligned to the broader economic crisis (see above section on structural drivers).

In low and lower-middle income countries like Zimbabwe and Viet Nam, the demand for protection services and inability to meet that demand on the ground often lead to an over-reliance on volunteers. In Viet Nam, it is also difficult to register for services if a family moves communes (see migration within the above discussion on structural drivers). In these countries, social work is not a well-developed profession. In Peru, where social work institutions are somewhat stronger and child protection systems appear to be functioning, problems remain: for example, service delivery seems to exhibit a bias towards urban areas. Violence affecting children is not easily addressed within formal or informal systems.

- Different types of violence tend to be handled by different programmes and agencies, preventing a coordinated response to the overall problem.
- Child protection interventions are designed without directly addressing the violent dynamics in families head-on. An over-reliance on referrals to police, hospitals and temporary refuges is equally problematic due to lack of financial and human resources and insufficient infrastructure—a trend across all four countries.
- Formal and informal (traditional leaders, family members, community groups) systems are not effectively linked. In some cases, police, the judicial system, schools, local governments and civil society organizations, have crowded out informal protection mechanisms, even though these formal institutions often fail to come to children's aid. Weak law enforcement and the related problem of poorly defined roles and responsibilities within the formal system compound these difficulties.
- Under-reporting is likely within formal or informal systems due to shaming of victims, sanctioning of different types of violence against children, and bureaucratic institutions not always being trusted or failing to connect with customary social networks of both children and their caretakers.
 - Formal institutions are sometimes perceived as threats to adults, especially if calling attention to a problem leads to a loss of custody and to children who generally do not trust official systems for fear of being implicated in the process and/or for fear of a lack of confidentiality.
 - Informal institutions may 'resolve' violent incidents through communal courts and other traditional processes that may not fully protect a child's rights.

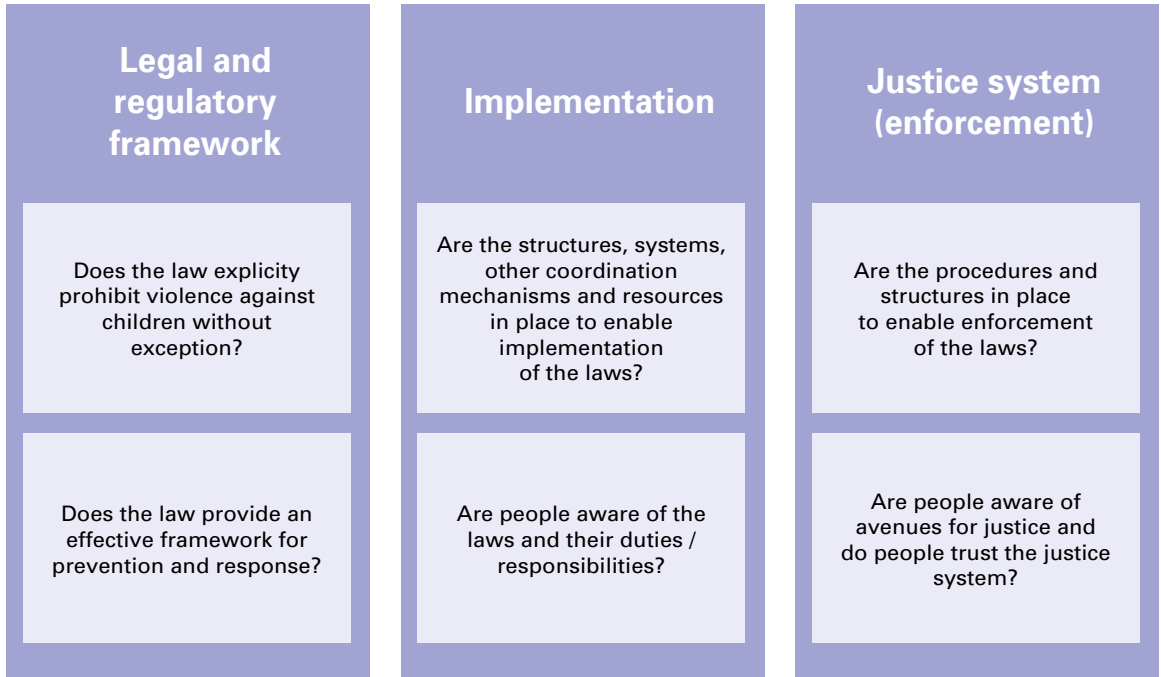
Institutional Driver

Legal and Justice Systems refer here to the existence of laws that support the prevention of and/or response to violence affecting children, as well as their implementation and enforcement, at national and sub-national levels.

Weak or ineffective legal and justice systems

The legal and justice system’s ability to prevent violence and protect children may be compromised when necessary laws are not in place or when existing laws are not effectively implemented and enforced. Figure 10 outlines three distinct yet interlocking areas in which the drivers identified in this section (including the discussion of child protection systems above) can be categorized.⁶⁸

Figure 10. Legal and justice systems



Relevant laws are not limited only to child protection or social welfare policy areas but also include laws pertaining to health, economic, education, environmental and other policies that affect the well-being of children, their families and their communities. Across all countries, there are indications that where laws do exist, they are generally not well enforced. Coordination among actors responsible for their implementation and enforcement may suffer due to fragmented or under-resourced child protection systems. Thus, one principal reason for weak or ineffective legal and justice systems is that laws to prevent or respond to violence are not in place or are not being effectively implemented

68 Credit to Rachel Harvey (UNICEF) for her support in conceptualizing this analysis

and enforced. The second principal reason emerging from the Study’s four country settings is a lack of awareness and/or trust, on the part of children or those who care for them, in the legal and justice system’s ability to respond.

Laws to prevent and respond to violence are not in place or not effectively implemented and enforced

International conventions ratified by Zimbabwe consider corporal punishment cruel, inhumane and degrading. However, the Criminal Law (Codification and Reform) Act allows parents or guardians to administer ‘moderate’ corporal punishment for disciplinary purposes to children under the age of 18. Similarly, corporal punishment for boys is lawful in schools.⁶⁹ In Viet Nam, while significant emphasis has been placed on strengthening the legal and regulatory framework for child protection, less progress has been made in providing quality prevention, early intervention and response services for children and families, and too often there is limited support for families experiencing difficulties (ECPAT International et al., 2014). Further, laws to prevent violence may be narrowly conceived as having to directly focus on violence rather than the structural factors that give rise to it: for example, prevention activities addressing violence against children are not well linked with family economic policies.

A lack of awareness and/or trust in the legal and justice system’s response

Poor understanding of the system can plague both providers and potential users of its services. For example, Peruvian law provides for alternative punishments for juvenile offenders such as warnings, community service and supervision, but they are rarely applied because judges are unfamiliar with the criteria and procedures (Strocka, 2008). Likewise in Zimbabwe, Chikwiri and Lemmer (2014) note that laws such as the Sexual Offences Act No. 8 of 2001 are not well known by teachers, particularly those working in rural schools.

Parents also mistrust the system. Among **Peruvian** child abuse cases that reach family court, the mistrust of parents manifests itself in a tendency to remove children from their homes and put them in institutions even though, according to law, this should be the option of last resort. There are numerous institutions for maltreated or orphaned children although there is little information about the quality of children’s lives within them. Many are run by Catholic religious orders with little or no public oversight.

Institutionalized discrimination or abuse

While relatively few examples emerged from the findings, this is an area worthy of further research and investigation. It links strongly with some of the structural drivers described above, particularly poverty and gender inequality. In **Italy**, Roma children continue to experience high rates of poverty and school dropout. Programmes to address their needs have tended to overemphasize the legal removal of children from their families rather than provide support for those families (Bello, 2014).

69 Under article 241 of the Criminal Law (Codification and Reform) Act, Article 15 of the Constitution, and article 66 of the Education Act (2004). Corporal punishment of children in the home, schools and the justice system is legal under some circumstances in Zimbabwe. Under the Criminal Procedure and Evidence Act, a male child under the age of 18 convicted of any offence may receive moderate corporal punishment not exceeding six strokes. Under the Criminal Law (Codification and Reform) Act (2004), parents or guardians may administer ‘moderate’ corporal punishment for disciplinary purposes to their minor child or ward. Similarly, for boys, corporal punishment is lawful in schools under article 66 of the Education Act (2004). Corporal punishment was ruled unconstitutional by the High Court on the basis that it is a form of inhuman and degrading treatment and this was upheld by the Supreme Court in 2015. However, in 2016, the Constitutional Court of Zimbabwe provisionally set aside the ban on corporal punishment for male juveniles convicted of committing a crime. The Constitutional Court has also ruled that moderate corporal punishment by parents, guardians or school authorities is legal.



For example, Roma children are 17 times more likely than their non-Roma peers to be declared adoptable.⁷⁰ Perhaps one of the most widely publicized cases of institutionalized abuse in recent times concerns the Catholic Church. Safeguards against paedophilia in the priesthood worldwide have been tightened as reports have entered the media (CRIN, 2014).

Legal and justice systems – patterns across all four countries

Findings across all four countries indicate that laws may be strong on paper but their implementation and enforcement is often inadequate and/or piecemeal:

- In many countries, corporal punishment in schools is against the law but remains common, as enforcement and implementation of existing laws are inconsistent (UNICEF, 2010a; Portela and Pells, 2015).
- Typically, laws applied in one place (the home) may not be reinforced in another place (the schools). Italy, for example, has prohibited corporal punishment in schools, in the penal system and in alternative care settings but not in the home. Such inconsistencies both in concept and practice situate ineffective legal structures as a dominant driver of violence for children in all four multi-country sites.

Institutional Driver

School governance refers to the structures and processes that are designed to ensure accountability, transparency, responsiveness, rule of law, stability, equity, inclusiveness, empowerment and broad-based participation within school settings. Governance also represents the norms, values and rules used and through which public affairs are managed in a manner that is transparent, participatory, inclusive and responsive.

Poor school governance

School governance is about the culture and institutional environment in which citizens and stakeholders interact among themselves and participate. School connectedness plays a role here and is defined as the belief held by students that adults and peers in the school care about their learning as well as about them as individuals (CDC, 2009).

Lack of adequate training in pedagogic skills and child development, quality of school relationships, unequal application of school rules and the use of hierarchy, authority, gender and punishment as institutionalized through schools *all contribute to weak school governance*. In all four countries there is a strong link between these factors and a child’s failure in school, which is identified as a risk factor for abuse both in the household and in the school.

⁷⁰ Saletti-Salza (2010) found in a study of 7 of Italy’s 29 juvenile courts that between 1985 and 2005, Roma children were 17 times more likely than non-Roma peers to be declared adoptable. The author indicates that social workers, and by extension those in the judicial sector, often assume Roma adults are unable to adequately care for their children. These cultural biases help explain the gross over-representation of Roma children in foster care or adoption.

Lack of adequate teacher training

In **Viet Nam**, students are more likely to speak out about bullying if they believe that it is seen as unacceptable and if they feel that teachers will deal with it constructively. Yet, studies highlight that this may not be the norm; as such, issues around bullying are generally not addressed (Pells, Portela and Espinoza, 2016; Horton, 2011). In Peru, Loza and Frisancho (2010) found that many early childhood teachers, including those with professional degrees and long experience, attribute children's aggressiveness to their experiences at home or to biological and genetic factors rather than factors they could control such as classroom organization or the behaviour of teachers.

Italy provides an insight into good school governance around bullying. In 2006, Italy launched a nationwide anti-bullying campaign which included such interventions as awareness campaigns and teacher training on how to handle bullying. These programmes seem to have led to a steep decline in reported bullying and victimization (Vieno et al., 2015; Menesini et al., 2012). The importance of student (peer) participation was highlighted, showing how institutionally based initiatives may rely on interpersonal mechanisms in order to be effective.

Quality of school relationships and unequal application of the rules

This institutional driver includes lack of school connectedness, and school personnel (most often identified as teachers) reinforcing or perpetrating violence against students, with the range of behaviours varying across context and country. In **Viet Nam**, teachers' violence against students was identified as a significant cause of school dropout (Hang and Tam, 2013). Some teachers single out particular students for punishment and this can affect the climate of the school, making bullying in general seem more acceptable (Save the Children Sweden, Plan Vietnam and UNICEF, 2005; Horton, 2011). In Peru, many children associate school with novelty, opportunity, enjoyment and freedoms they lack at home. But violence from peers and teachers is common from preschool through high school and gang violence can increasingly persuade children not to attend school (Pells et al., 2016).

Vietnamese society places great importance on education and many children face pressure to succeed academically (Truc et al., 2015; Pham, 2015). When excessive, this can undermine children's mental health and contribute to suicidal ideation and attempts as well as behavioural problems (Le et al., 2012; Huong, 2010; Michaelson, 2004; UNICEF, 2006).

In **Zimbabwe** there are multiple examples of teachers misusing their power and authority to reinforce or perpetrate acts of violence against children in school through corporal punishment, bullying, stigma and discrimination. Zimbabwean teachers may not consider name-calling or shouting at students to be abusive behaviours (Shumba, 2007), and may perpetrate emotional violence by humiliating certain children in front of others (Shumba, 2004; ZIMSTAT, UNICEF and CCORE, 2013; Gudyanga, 2014). Several studies show that teachers use their 'dominant role' to perform abusive acts including rape or soliciting sex with school children. Teachers may also take advantage of pupils' ignorance of the laws against such behaviours (Tshabalala and Khosa, 2014; Shumba, 2001).

Hierarchy, authority, gender and punishment as institutionalized through schools

Violence can serve to reinforce social identities, power relations, prestige hierarchies, access to resources, symbols and displays of gender and generational identities. Even very young children are subject to these processes, including through the military atmosphere of many schools in **Peru**. Rojas (2011) found in the Andes that girls and boys were put in separate classrooms and, for boys, signs of femininity – like not returning blows, running from fights or expressing pain while being punished – were scorned. Similarly, in **Viet Nam**, boys seldom report bullying because they fear being seen as 'meek' (Horton, Lindholm and Nguyen, 2015). Girls tend to remain silent because their very presence and gentle demeanour is supposed to help control the behaviour of boys. Teachers often remain silent out of desire to maintain their own positions of authority (Horton, 2011). The feedback loop between violence and the structural driver of gender inequality becomes clear as it is reinforced through institutions like schools where children are socialized.

Poor school governance patterns across the four countries

Schools are important in all four countries as children spend the majority of their time outside their homes in or around schools. While school governance issues vary broadly among the four countries studied, common patterns appear.

- Inadequate training in pedagogic skills and appropriate child development (according to age and gender) is common due to a lack of resources and/or priority. Codes of conduct for teachers are difficult to observe leaving teachers free to reinforce or perpetrate violence. Children may also be exposed to direct and indirect bullying through their peer relationships.
- In nearly all countries, though to varying degrees, the quality of school connectedness tends to be below what children need or want.
- Finally, poor child protection systems tend to overlook the importance of confidential mechanisms for children in all countries to report violence perpetrated against them in and around schools.

5. DISCUSSION: COMBINING AND CONTEXTUALIZING THE ANALYSIS — THE DRIVERS AND RISK FACTORS

At the start of this paper we proposed that the socio-ecological framework, based on Bronfenbrenner’s (1979, 2005) model of hierarchically nested ecosystems, could help frame how, where and why violence happens. It acknowledges that human behaviour is shaped by multiple, interrelated influences on multiple levels, and we apply this to the perpetration or experience of interpersonal violence by children. While the framework helps delineate the factors that contribute to violence in children’s lives, our analyses also suggest that little is linear or predictable.

In all four countries we have seen how rapid socio-economic change, poverty, gender inequality and migration shape the context in which violence is more (or less) likely to happen. We have also shown how the institutionalization of these forces manifests in policies and practice. Importantly, these structural and institutional drivers are also evident in the risk or protective factors that manifest at the individual, interpersonal and community levels of the socio-ecological model. It is this *interaction* between drivers and risk/protective factors that delineates how, where, when and why violence occurs in children’s lives. The analysis shows that a given factor may be protective in some combinations or increase the potential for abuse (potentiating) in others. As scholars pointed out nearly two decades ago, it is the combination of risk potentiating and protective factors in all levels of the system that determines the likelihood of maltreatment rather than a single factor serving as a causal influence in isolation from the others (Cicchetti and Carlson, 1989).⁷¹

While scholars and practitioners agree that prevention requires an understanding of all the factors that influence violence, too frequently these factors are ascribed to one level or another in the model creating a static, if not simplistic, interpretation of a very complex social phenomenon. As a result, in the research to policy and practice transfer, researchers, policymakers and programmers often do not address the complexity that may influence the way violence manifests in children’s lives—*at all levels*. Failing to account for this complexity has created a fractured approach to violence prevention, with the tendency to develop interventions stripped of critical and dynamic contextual factors (see discussion on complexity science in Section 1, ‘Making violence visible: An introduction to key study context and concepts’)

The child in the centre: Revising the framework

Drawing on these many theories and working with national teams, the analysis and the study are practically focused on the pressing need to translate data into action. While the challenge of addressing violence is daunting, recent evidence shows that preventing violence *is* possible, though not necessarily straightforward. In some cases, macro-level reforms – that is, reforms at the structural or institutional level – in, for example, policing and economic development have been linked to violence reduction.⁷² In other cases, a focus on risk factors has been used, with evidence of reduced interpersonal violence linked to community-level interventions focused on health, economic support and power inequality.⁷³ Interventions specifically targeted towards individuals and families

⁷¹ D. Cicchetti & V. Carlson (Eds.), *Child maltreatment: Theory and research on the causes and consequences of child abuse and neglect*, Cambridge University Press, New York, 1989, pp. 377–431.

⁷² Finkelhor, D. and L. Jones, ‘Why Have Child Maltreatment and Child Victimization Declined?’, *Journal of Social Issues*, vol. 62, Issue 4, December 2006, pp. 685–716.

⁷³ Abramsky, et al., ‘The impact of SASA!, a community mobilisation intervention, on women’s experiences of intimate partner violence: secondary findings from a cluster randomised trial in Kampala, Uganda’, *Journal of Epidemiology & Community Health*, vol. 70, 2016, pp. 818–825, <http://jech.bmj.com/content/70/8/818>

in the areas of education, awareness raising and behaviour change have, in some cases, also led to reductions in violent crime, partner violence and negative parenting practices.⁷⁴ However, to date, most interventions tend to remain sector-specific, occurring in isolation from action to address broader institutional and structural forces that may be fuelling interpersonal violence. Interventions may therefore not address the pathways or specific factors that lead to reduction of violence against girls and boys. Interventions are often fairly limited in responding to violence across the cycle of children's lives. Millions of children continue to be exposed and at risk. It is time to turn the tide.

To address this, we propose two action-oriented ways to make violence visible, with examples from our secondary analysis of data sets from Viet Nam and Peru. First, we offer a more **child-centred and integrated application of the socio-ecological framework** for understanding what drives violence, fully acknowledging a child's social ecology but focusing more on the intersections – or interactions – between all levels of the model. Mapping our findings onto the framework clarifies what is happening and where potential points of intervention might be. Second, we draw on the intersectional approach to show how children, at the centre of this framework, are indeed multi-dimensional social beings⁷⁵ – most obviously in terms of **age and gender** – and that some of these factors, including race, ethnicity, socio-economic class, family situation and other individual characteristics, change. Violence is a dynamic phenomenon as children grow and develop their capacities through adolescence and into adulthood. Plotting data across the gendered lifecycle gives visibility to how these changes happen over time and who is most affected.

A child-centred and integrated framework for addressing violence affecting children

Holistically, how can we as scholars, researchers, policymakers and practitioners concerned with child and family well-being take seriously the reality of these intersecting levels, systems and factors? How can we model this complex reality to produce improved knowledge, practice and policy within the field of violence prevention? What would this framework look like?

Our findings support the idea that no single level within the socio-ecological model – and no single factors (drivers or risk factors) within or between those levels – determines or explains an act of interpersonal violence involving a child. Instead, each factor, when combined with one or more other factors, may lead to a situation where a person perpetrates violence against a child. We fully acknowledge that this framework is not new—it was first used to explain human development by Bronfenbrenner (1977) and later was used to elucidate the complex issue of child abuse (Belsky, 1980), sexual coercion (Brown, 1995) and domestic violence (Heise, 1998). But describing an approach for systematically mapping existing qualitative and quantitative data is indeed new to the field of violence prevention for children. Too often, child protection practitioners have approached the issue of violence in a reactive manner, based on specific incidents or types of violence and rarely stepping back to consider how incidents of violence map onto a theoretical framework (socio-ecological or otherwise) or to review existing evidence around what drives violence and how it can be prevented.

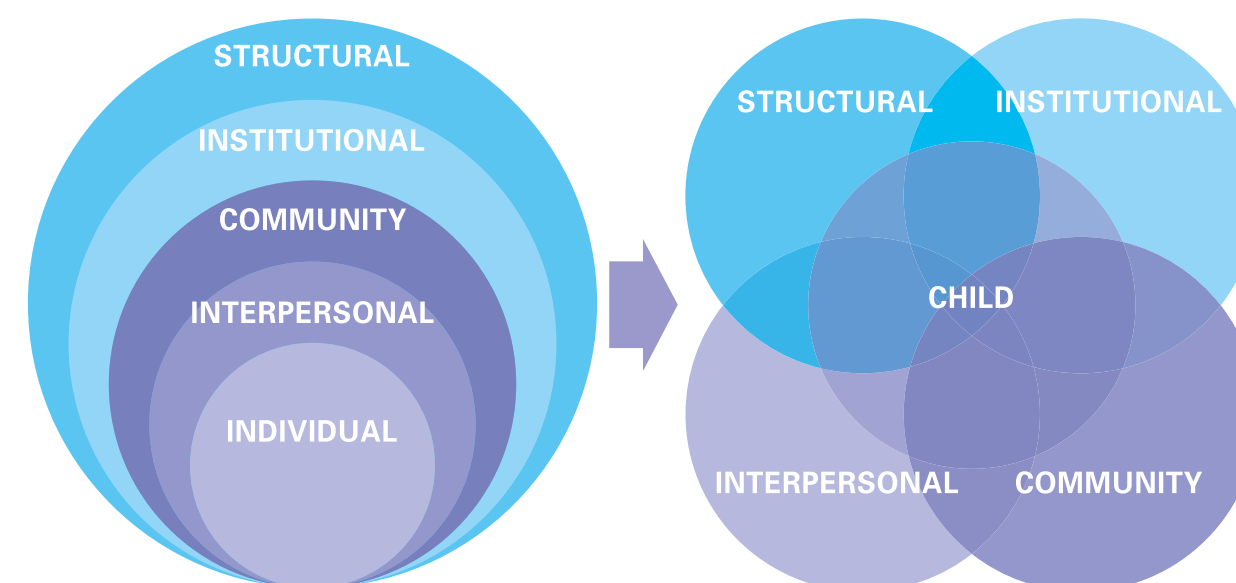
An integrated framework shows the potential intersectionality of each level rather than presenting them in a visual manner which may be interpreted as less dynamic and more hierarchical than

⁷⁴ Allen, G., *Early Intervention: the Next steps*, Chapter 4: Early intervention: good for the economy. London, 2011; Studies cited in: Kerr, W., F. Gardner and L. Cluver, Centre for Evidence-Based Intervention, Department of Social Policy and Intervention, University of Oxford Briefing Paper, Preventing child abuse and interpersonal violence in low- and middle-income countries. SVRI Briefing Paper, July 2011; Jewkes 2008.

⁷⁵ "My focus on the intersections of race and gender only highlights the need to account for multiple grounds of identity when considering how the social world is constructed." – Crenshaw, 'Mapping the Margins: Intersectionality, Identity Politics, and Violence Against Women of Color', 1993, p. 1245, http://socialdifference.columbia.edu/files/socialdiff/projects/Article_Mapping_the_Margins_by_Kimblee_Crenshaw.pdf

intended. It is designed to assist practitioners in visualizing how drivers and risk and protective factors interact within a child's social ecology (see Figure 11). Importantly, it maintains the child (rather than 'the individual' representing a list of risk or protective factors) at the centre—as a child interacting, interfacing and overlapping with a variety of drivers and risk and protective factors throughout the lifespan.

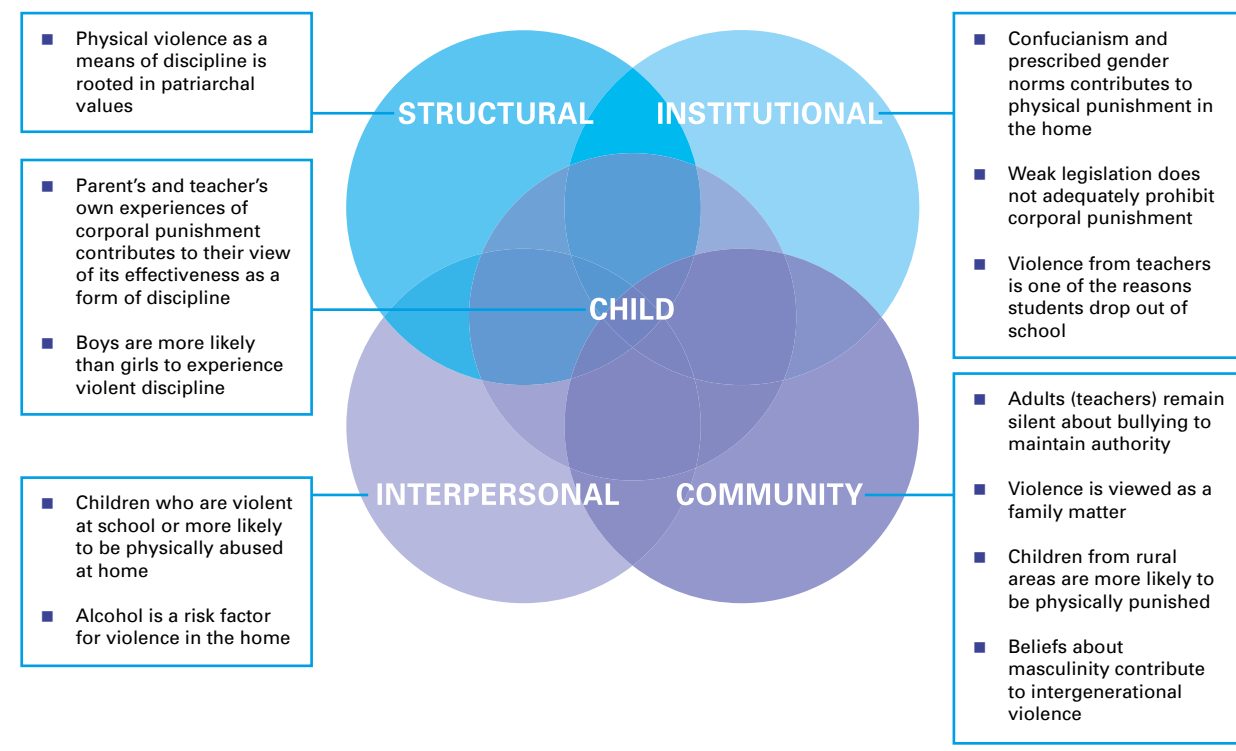
Figure 11: A child-centred and integrated framework for violence prevention



The integrated framework allows for recognition that a driver, such as migration, is not as distal as represented in the traditional socio-ecological model. It clarifies the realities in which children may find themselves due to interlocking structural and institutional factors that shape their social worlds. Shifting from a seemingly hierarchal representation of the levels of the socio-ecological framework to one in which the variety of ways in which levels interact is more fully represented makes it easier for those working to prevent VAC to visualize – for any given topical area – the multiplicity of issues that are required to make a child's world safe. Understanding the myriad of factors occurring within and among each level can guide more effective coordination and systems building.

Bringing clarity to complexity: An example from Viet Nam

This integrated framework helps *apply* the findings from this research in an effort to model new practice. It helps bring clarity to complexity (see Figure 12). As a result, it encourages practitioners and policy makers to think about what can be done in an integrated and multi-sectoral manner. The integrated framework encourages a more intersectional approach to practice. An example from this Study highlights the utility of this approach.

Figure 12: Applying the framework in Viet Nam**Child Centred and Integrated Framework for Violence Prevention:
Violent Discipline in the Home, Viet Nam**

In Viet Nam, findings around physical violence indicate multiple reasons why corporal punishment is so widespread—ranging from the structural to the individual child. By moving findings discovered at each level into the domains represented, practitioners may arrive at a more holistic evidence-based understanding of the myriad of issues that influence violent discipline in the home. Mapping the findings also makes clear which stakeholders within which and/or between which domain(s) need to be engaged to address the diversity of issues (drivers and risk factors) that define the corporal punishment.

Adaptation is critical. When plotted against the Child-Centred and Integrated Framework for Violence Prevention, findings for Viet Nam suggest that ‘parenting practices’ is only one facet of a very entrenched issue. An intervention to reduce violent discipline in Vietnamese homes would likely require a series of simultaneous interventions at the level of the drivers and at the level of risk factors that engage stakeholders from multiple ministries such as Education, Labour, Invalids and Social affairs, including the Department of Gender Equality, the Children’s Directorate and the Department of Social Evils Prevention. Each of these stakeholders plays an important role in addressing the issue of violent discipline in the home. Good interventions are likely to require *both* an evidence base and cultural specificity.

The introduction of this integrated framework is timely. Scholars working in the field of social norms and intimate partner violence are simultaneously proposing a similar integrated framework, the “Dynamic Framework for Social Change”, to help practitioners plan for multi-layered interventions

that integrate social norm change within the other factors contributing to violence (Cislaghi and Heise, under review).⁷⁶ Specifically, they propose a framework to help practitioners “...diagnose the factors that maintain a practice/behaviour and design a change strategy to address them” (2016, p. 38). Their Dynamic Framework offers a practical tool to embed work on social norms within a wider understanding of the many drivers influencing a given practice or behaviour in a given context. The framework has four domains of influence: structural, material, social and individual. It also invites reflection on the factors that specifically sit at the intersection *between* domains.

While the Child-Centred and Integrated Framework grounds the evidence through a focus on the child, the Dynamic Framework for Social Change embeds the potential influence of social norms on a given practice within the system of structural, material, social and individual factors that interplay and sustain that practice. Combined, these two frameworks can help practitioners situate drivers and risk/protective factors in relation to the child (through the Child-Centred and Integrated Framework) and map and prioritize social norms-related drivers and risk/protective factors for further action (through the Dynamic Framework). Examples of potential drivers/factors at each socio-ecological level include patriarchal beliefs (structural); religion and gender norms as well as the nature of school governance that negatively affects teachers’ behaviours (institutional); beliefs around masculinity, the code of silence among teachers and parents and what differentiates a rural from urban context (community); the potential links between home and school as well as the role of alcohol in the home (interpersonal); and finally parents and teachers own experiences of corporal punishment and why boys are more likely to experience violence (individual).

Ultimately, social norms live in the individual – as beliefs and perceptions – but there are many interdependent issues that might explain what drives that behaviour or perception. Understanding whose beliefs matter is critical. As seen in Viet Nam (as in other countries around the world), children may be more frequently punished by mothers as compared to fathers. This does not mean that fathers are not relevant. One way this can be observed is at the structural level, where patriarchy manifests as an invisible form of harm and affects how fatherhood is perceived and carried out—including in households headed by women or children (where fathers are not present). It is far too easy to conclude that mothers in Viet Nam are the disciplinarians. Mothers’ actions are determined by numerous factors; understanding the sources of this behaviour must include examining the structural and institutional drivers interacting at the individual level, in the interpersonal/family sphere and in the community.

Frameworks for violence prevention are useful insofar as they support the successful application of learning – whether that be learning based on research, evaluation, practice, policymaking or a combination of these – and are flexible enough to be open to iteration and combination with other useful frameworks and tools. Our proposed *Child-Centred and Integrated Framework for Violence Prevention* serves to situate national findings according to a child’s social ecology, making clear how drivers and risk/protective factors appear to be interacting. The *Dynamic Framework for Social Change* proposed by Heise and Cislaghi⁷⁷ helps practitioners begin to translate findings into effective planning. Used together, these frameworks serve to translate theory- and evidence-based insights into “promising avenues for achieving change” (p. 2).⁷⁸

⁷⁶ Cislaghi, B. and L. Heise, ‘A dynamic framework for using social norms to prevent harmful behaviours in low and mid-income countries’, under review.

⁷⁷ Cislaghi, B., & Heise, L. (2018). Using social norms theory for health promotion in low-income countries. Health Promotion International. <https://doi.org/10.1093/heapro/day017>

⁷⁸ Heise, L. & Cislaghi, B. (2016). *Measuring social norms: A learning report. Project Report*. London: LSHTM. <http://researchonline.lshtm.ac.uk/4646486/>

Violence as dynamic: Age, gender and power

In addition to the socio-ecological framework, our findings demonstrate how age and gender remain central to any analysis of violence affecting children. The disaggregation of data by both age and sex is critical to understanding the changing effects that violence can have on children in a variety of settings (UNICEF, 2016⁷⁹). Too often, VAC theories and frameworks fail to take into account the extraordinary implications of age and its nexus with socially ascribed gender roles based on biological sex: as children grow, their capacities and vulnerabilities evolve and change. Learning more about the timing, nature and consequence of key transitions experienced by young adolescents and, in particular, when these transitions typically occur in the life course, is the grid upon which effective violence prevention should be built.

Intersectionality proposes that the basic aspects of one's identity – such as age and gender – need to be examined as simultaneously interacting with each other and affecting one's status or perception in society. Copper (2016) argues, using a feminist lens, that these facets of identity need to be considered within a broader analysis of power. Birchall seconds this, writing about people who are seeking refuge or are in situations of forced migration:

Without a gender and age sensitive approach to policymaking, we cannot fully understand the needs, experiences and motivations of refugees and migrants. Without it, policymaking cannot address migration and forced displacement at its root causes, and it cannot promote and enable the opportunities that migration offers.⁸⁰

Factors that may put children at risk and/or protect them from harm

Our understanding of violence reinforces that individual and interpersonal risk and/or protective factors – for example, a child's ethnicity or disability or their relationship with the caretakers and other adults upon which they are dependent – also needs to be considered holistically with the lifespan in mind. As children grow and change there are multi-layered pressures in their lives that they must confront, particularly as expectations of who they are also change. Understanding, for example, what drives violence against a seven-year-old boy may be quite different than that which affects a 14-year-old boy, with different societal and individual consequences. The role of power circumscribes this process and can shift in both positive and negative ways as a child gains capacities.

As noted in Section 3 ('Identifying risk and protective factors'), many factors are measured in relation to risk and it is not always clear in what stage(s) in a boy or girl's development this risk is most pronounced and when it may reduce. Further, when seeking to categorize various factors as 'risk' or 'protective', they may be de-linked from the context in which they occur (either within the initial analysis or when results are synthesized at regional or global levels). Examining such factors within a socio-ecological framework can assist in repairing such linkages. Finally, the lack of protective factors identified in the literature review begs the question of whether they do not exist or whether we have generally not been looking for them. It may in part be due to the outcome of interest being violence, making it less likely that factors that protect children from violence or analysis of outliers are examined. The risk at a global level is that resources may be misdirected towards interventions and policies that prevent risk and away from those that best reinforce resilience.

By comparing boys' and girls' experiences of violence in four different countries, we know that gender inequality can be a marker of status with impacts on how girls and boys are treated. The predictive value of age and gender as risk and/or protective factors changes depending on a young person's stage of development, social context and other circumstances. Risk and protective factors may be characteristics of the individual child, their environment or their ability to respond to the demands and requirements of that environment. Some factors come into play during childhood or even earlier, whereas others do not appear until adolescence. Some involve the family, others the neighbourhood, the school and/or the peer group. Some become less important as a person matures while others can persist throughout the lifespan. To complicate this even further, some factors may constitute risks during one stage of a child's development but not another (Office of Surgeon General, 2001). Research shows that emotional, physical and sexual abuse may co-occur in contexts characterized by other life adversities.⁸¹ Finally factors that predict the onset of violence are not necessarily the same as those that predict the continuation or cessation of violence.

Effective violence prevention hinges on identifying both risk and protective factors and determining when in the course of a child's development they emerge, then recognizing and addressing the contextual issues that may exacerbate (or minimize) linked vulnerabilities. Importantly, our findings show that all of these factors can vary depending on age and/or gender. Data disaggregated by age and gender can help visualize these changes. The nature of violence is intimately connected to how relationships and their inherent power dynamics are structured within and between families, peers and communities. A child's vulnerability and ability to protect herself from violence changes over time with her evolving capacities. This is challenging in concept and practice: there is no global consensus around categorizing children's and young people's stages of life, and regional or subregional variations may also be expected.

Figure 13, drawing on data from **Peru**, plots data against the age and gender timeline to make visible when (and where) violence affects children. Coupled with an analysis of where drivers and risk and/or protective factors fall against the Child-Centered and Integrated Violence Prevention Framework, this timeline helps practitioners identify both data gaps and potential entry points for interventions targeting the right populations at the right time in children's lives and in the right settings.

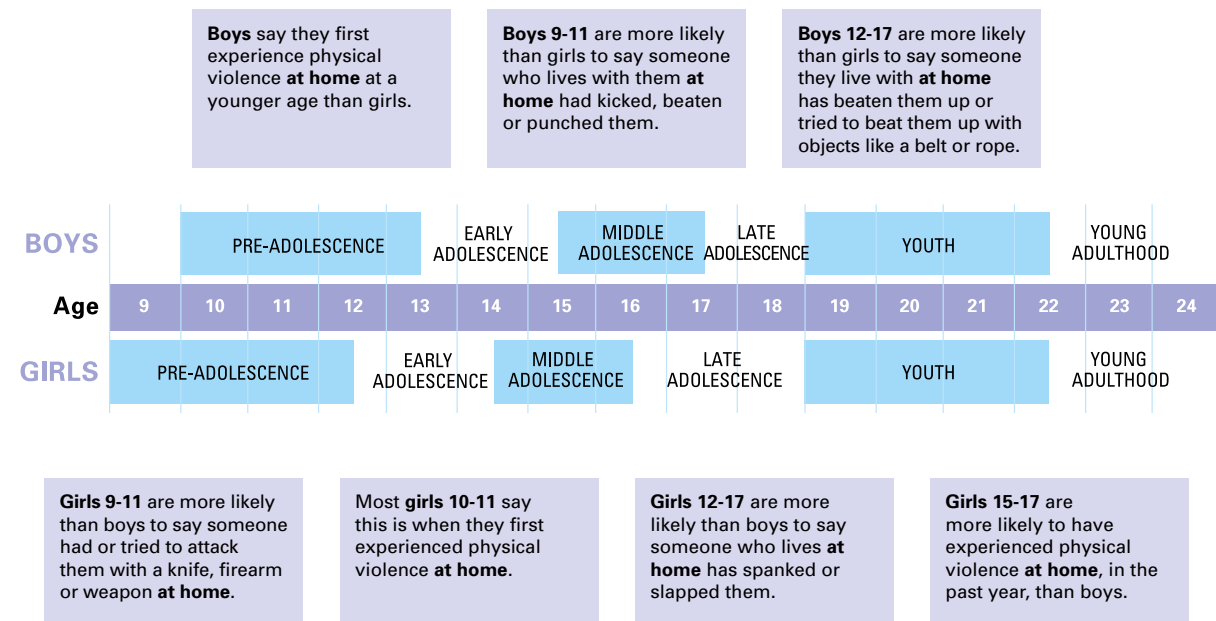
79 UNICEF, *Collecting and Reporting of Sex- and Age-Disaggregated Data on Adolescents at the Sub-National Level*, <https://data.unicef.org/wp-content/uploads/2016/11/Data-Abstraction-Guide-November-2016.pdf>

80 www.unicef-irc.org/article/1390/

81 Le, M.T., et al., 'Polyvictimization Among Children and Adolescents in Low-and Lower-Middle-Income Countries A Systematic Review and Meta-Analysis', *Trauma, Violence & Abuse*, 2016, pp. 1–20.
Finkelhor, D., et al., 'Polyvictimization: Children's Exposure to Multiple Types of Violence, Crime, and Abuse', OJJDP, Washington, DC, 2011.

Figure 13. How age and gender affect vulnerability to violence: An example on children’s experiences of violent discipline in Peru

Age and Gender: Violent Discipline in the Home, Peru



types of violence in the home—interventions aimed at understanding these differences that include both parents and children could prove fruitful. Practically, this may indicate that such interventions identified in the Study’s interventions mapping exercise should be prioritized for evaluation and testing, if not already underway. A next step would be plotting data on violence and schools against the same framework. The results would make visible interactions and/or overlaps between the home and school.

Thus, an important application of mapping violence against both age and-gender is better understanding and identifying points of entry, through multiple sectors and types of interventions. A recently completed research impact assessment of the Study in Peru⁸² (publication forthcoming) illustrates how this has already occurred:

The Ministry of the Interior was also said to have used the study to inform their multi-sectoral strategy, Barrio Seguro (Safe Neighbourhoods) to improve violence prevention and response. The strategy coordinates 8 ministries, including MIMP, to prevent crime and violence and create safer communities through community policing and coordinated interventions with the education, health and social protection sectors. In their questionnaire response, a MIMP officer stated that the strategy is considering the drivers of violence identified in the study in order to improve their approach. For example, in the decree that approved the strategy (Decreto Supremo No 008-2017-IN que aprueba la Estrategia Multisectorial Barrio Seguro), it acknowledges the home as a place where high levels of violence occur and that focusing efforts on preventing violence at home is needed as it is an important risk factor for delinquency.

Prevention of violence depends on connecting these dots and facilitating collaboration between often disparate ministries and programme interventions. Safe neighbourhoods must include safe homes; healthy bodies include bodies free from violence; educated minds include minds safe from harm; and so on.

In the next and final section of this synthesis we suggest recommendations based on the entirety of this study. We focus on three main recommendations for the field of violence prevention research:

- promoting the process of doing research on sensitive subjects like violence prevention and how this is informed by social realities of working with government and civil society;
- the importance of a mixed methods approach and recommendations for future research based on the findings and experience; and finally
- the need to consolidate knowledge so that future work – within research, policy or programming – is centred within frameworks, theories and concepts that are attuned to the very dynamic and often dangerous world that young people inhabit.

KEY POINTS:

- **Girls’** risk of experiencing physical violence **at home** increases with age.
- **Boys** are more likely to be victims when they are younger, and to become perpetrators as they age.
- **Girls and Boys** experience different types of physical violence **at home**, and their risk changes as they age.

In terms of practical implications, the Peru data above would suggest the need for very early interventions focused on the boy-child and in the household and prior to age nine. It suggests that those coordinating child protection interventions in Peru, such as the government, UNICEF and partners, should consolidate interventions strategically around certain ages. This could mean working with health or education actors, for example linking with an early childhood development programme to target very young children and to understand what aspects may reinforce existing protective factors and how such programmes could identify and respond proactively to potential risks. The data also suggests that girls and boys aged 9–11 years are experiencing very different

⁸² The assessment was made possible by an Economic and Social Research Council Impact Grant, applied for jointly by UNICEF Office of Research—Innocenti’s Research Facilitation and Knowledge Management and Dr. Sarah Morton at the University of Edinburgh, who led the impact assessment and is Co-Director (Knowledge Exchange) of the Centre for Research on Families and Relationships. It was based on the Research Contribution Framework (RCF) she developed, see: Morton, S., ‘Progressing research impact assessment: A ‘contributions’ approach. Research Evaluation’, *Research Evaluation*, vol. 24, no. 4, 2015, pp. 405–19.

CONCLUSION AND RECOMMENDATIONS

The aim of the *Multi-Country Study on the Drivers of Violence Affecting Children* in Italy, Peru, Viet Nam and Zimbabwe was to help policymakers understand what drives violence and what can be done about it. Based on principles of human-centred design, the study intended to help stakeholders acknowledge violence in childhood while gaining the confidence and evidence to plan and develop effective interventions. The findings of the research programme presented in this synthesis begin to explain how history, culture and politics shape the way that violence manifests in children's lives.

Using existing nationally representative data and internationally and nationally led research that met defined quality criteria, we analysed with our national partners nearly 500 published research studies and 10 national data sets addressing violence affecting children across our four country sites. Mapping the types of violence and places where these occur was an important exercise.

Our findings confirmed that violence affecting children is manifested differently in every society. Unequal power dynamics operating across gender, age and other status markers create the changing circumstances within which violent acts occur. The findings further reinforce theories of interpersonal violence as a socio-ecological phenomenon and not merely an interaction between a victim and perpetrator.⁸³ Our analysis demonstrates how factors on multiple levels – the individual, the interpersonal, and community – interact in many ways to increase or decrease a child's risk of experiencing violence.

In presenting our findings, we shifted our focus away from categorizing violence by type (emotional, physical or sexual) and instead considered the places where children, live, learn, play and often work: in their homes, schools and communities. Using place as the basis of analysis identified two important issues that are often overlooked in studies measuring violence. First, while violence affecting children is present in every country, levels of inequality and violence differ both between and within nations. This means that understanding a country's political economy from past to present is essential in order to contextualize what drives violence. Second, change in children's lives is not always predictable and the environments in which they live can be unwieldy. This means that the predictive value of risk factors like age and gender changes depending on a young person's stage of development, her life context and opportunities, as well as resources available to children and their families and communities, which in turn are determined by macro structural factors such as inequality and deprivation.

The focus on place enhanced the discussions, debates and deliberations that ensued within each country team and pushed the analysis further: it made clear that identifying a type of violence that occurs in a place or even several places still obscures the larger structural and institutional factors that drive that violence. The connections between a country's history, culture and economic and social progress as well as the institutional responses to these macro forces loom large. Recognizing this, our national teams built a model that addresses a child's agency – which lies at the heart of the Convention on the Rights of Children – while also acknowledging the interlocking structural and institutional factors that shape children's changing social worlds.

83 Heise, L., 'What Works to Prevent Partner Violence? An Evidence Overview', Working paper (version 2.0), December 2011.

The topic of violence in childhood is both sensitive and politically charged. No government wants to claim that it fails to protect its smallest, youngest and most vulnerable citizens. Recognizing this, this study provided a way of understanding violence that was inclusive from the start. Drawing on the human-centred approach, national teams made up of government, academics, UNICEF staff and civil society members, fuelled the analysis and the creation of products that resonated deeply with their audience, ultimately driving engagement and growth. We documented the research process – including its failures – along the way and, in doing so, we have learned many lessons.

In this final section we offer three important reflections for the field of violence prevention research that centre around: the **research process**, the **research methods** and the **pathway forward** as a way to link quality research, translate it into evidence and turn evidence into effective and meaningful interventions.

The process






Our approach to violence prevention was nationally driven and drew on the principles of human-centred design. Our initial forays into Italy, Peru, Viet Nam and Zimbabwe during the first year of the project were focused on building the research infrastructure needed to understand violence. Using an enabling, solution-focused approach, we worked with national committees and lead ministries – keeping government stakeholders at the centre of our design – who then mobilized their own teams with the requisite skills to help tackle common problems and introduce relevant change. We emphasized data sovereignty ensuring that data was analysed on national soil and interpreted by multi-stakeholder groups. When needed and requested, we provided the training within government statistics offices or among local agencies. By holding the data in their own hands, in some cases for the first time ever, national stakeholders’ understandings of violence were enhanced and momentum was built. A Zimbabwean data analyst who was engaged in a secondary analysis for the study and who had previously collected data for his national survey for many years noted in an astonished tone: “So this is what we were collecting data on?” The same technician was then empowered to explain the analysis to his stakeholder group.






Using a solutions-oriented approach naturally called for pragmatic, effective ways to think critically, solve problems and reframe issues in novel ways. What started as a group of the ‘usual’ and existing national committees of child protection specialists, expanded over time – as the data and findings were presented – to include other sectors. We encouraged internal alliances rather than external dependencies. In Peru, the Ministry of Gender called on the Ministry of Finance, for the first time ever, and built collaborations that have now evolved into joint funding and analysis. And in Viet Nam, the engagement of multiple ministries in several intensive discussions around the data and findings led to the willing creation of an inter-ministerial decree that requires all ministries to address violence prevention. The design of the project included regular meetings of planning, action, reflection and revision drawing on local knowledge, feedback and energy, and fostering learning from both successes and failures. By legitimizing the political, managerial and social levels of society within each country, the issue of violence against children became nationally owned in reality rather than only on paper.

In the process there were outcomes – and even impact – before outputs (see Figure 14). Legal reforms were made in Peru and Viet Nam; national budget allocations were shifted in the course of the project to fund violence prevention research in all four countries; national action plans for children were updated and revised with the findings; and over 50 national actors have received hands-on training and have increased their capacity to analyse, interpret and synthesize quantitative and qualitative

data—the indirect beneficiaries of this process are many. The impact of the study, in at least one country, has been captured through an assessment using the Research Contribution Framework (RCF; Morton, 2015⁸⁴); plans are underway to complete the assessment in the other three sites.⁸⁵

Figure 14: 2014–2016 Research Outcomes

	Italy	Zimbabwe	Viet Nam	Peru
	✓	✓	✓	✓
	✓	✓	✓	✓
			✓	✓
	👤 20 data scientists 👤 8 social scientists 🏛️ 4 ministries (lead) 🏛️ ~20 ministries (joining)			
	IDI	WUA, ACPDT	VASS, IFS	PUCP, GRADE
	UoE - UoO			

-  Informed National Action Plans for children
-  Allocated gov’t funding for violence prevention research
-  Passed new laws
-  Capacity building and training
-  Facilitated new North-South collaboration

While there are dozens of products resulting from this study (Annex C; www.unicef-irc.org/research/274), it was the process of producing these that was so powerful. A solution-oriented vision allowed for logic and creativity, deductive and inductive thinking, reason and imagination, and problem-solving and solution searching. In turn, this process fostered real-time solutions to real problems with real impact, while building trust and empowering governments to do more. The institutional normative shifts have been significant as violence prevention once hidden from the public purview now occupies national dialogue (Morton and Casey, 2017⁸⁶).

KEY TAKEAWAY: Research processes that engage and empower stakeholders can contribute to a common strategy for building and sustaining political will to end violence against children.

84 Morton, S., ‘Progressing research impact assessment: A ‘contributions’ approach’, *Research Evaluation*, vol. 24, no. 4, 2015, pp. 405–419.

85 The framework allows for a focus on the roles of research users, and examines both processes and outcomes. This approach gets around some of the common problems in assessing impact: it provides a method of linking research and knowledge exchange to wider outcomes whilst acknowledging and including contextual factors that help or hinder research impact.

86 Morton, S. & T. Casey, *Changing National Policy on Violence affecting Children: An impact assessment of UNICEF and partners’ Multi-Country Study on the Drivers of Violence affecting Children in Peru*, University of Edinburgh, Edinburgh, 2017.

The methods

One of the more challenging aspects of this Study was the data. Although each country participating in the study had at least one nationally representative survey addressing violence affecting children, this data was nearly impossible to compare due to data gaps, the absence of standardization of definitions, and other inconsistencies between countries. Advances in the application of public health methods for violence prevention have led to great achievements in understanding and action, but a reliance on public health alone risks missing what cannot be captured in the violence-as-disease model. Furthermore, surveys, which have been the gold standard in violence prevention research, tend to underestimate the magnitude of the problem or focus on one type of violence and not another. In a recent report from the Know Violence Learning Initiative, the authors conclude:

It is difficult to gather data on a subject that embraces intimate family relationships, involves societal taboos, and is often condemned or illegal. The difficulties are even greater when it comes to children. Violence against children tends to go unrecorded (2017, emphasis added; see also Pells et al., 2015, Huong 2016).^{87, 88}

To accommodate these gaps and deficiencies, we used a mixed-methods approach and in the process found a great deal of data—most of it published nationally, some of it in local languages and all of it with huge relevance to violence prevention. We purposely recycled existing data. By uncovering quantitative and qualitative research and data, national teams gained breadth and depth in their understanding of violence by type and place, while offsetting the weaknesses inherent to using each approach on its own. Even more important, access to longitudinal data from the University of Oxford’s Young Lives studies in Peru and Viet Nam brought the essential aspect of time into the discussion.⁸⁹ In this way, our approach to a mixed-methods study design was *layered*. This opened up new possibilities for triangulation, i.e., the use of several means – methods; data sources; researchers, policymakers and practitioners – to examine the same phenomenon. Finally, the approach inspired national teams to deliberate and ultimately decide collectively on the best path forward.

In the process of digging for data, national teams effectively plotted data onto each level of the socio-ecological framework, pulling from studies that met quality assurance standards. It became clear early on, that the task of plotting data also involved the dismantling of complexity in order to decipher interactions between, across and within levels of the framework. In all of the country settings, the researchers struggled to draw a more complete picture of the complexity surrounding violence affecting children. Our layered mixed-methods approach and strong reliance on qualitative analysis helped capture these dynamics. Overall, qualitative studies and secondary analysis of qualitative data proved to be invaluable. This data situated violence in children’s lives, captured their voices and helped explain the underlying mechanisms, both distal and proximate, which drive violence.

Understanding violence requires sensitive qualitative approaches for a topic that is taboo, often associated with shame or guilt, and that generally resides in the private spheres of people’s lives. The qualitative findings provided important insight into the subjective experience of violence and a greater understanding of the context and meanings associated with it. In Zimbabwe, an analysis of

87 Pells, K., Wilson, E. and T. H. Nguyen, ‘Negotiating agency in cases of intimate partner violence in Vietnam’, *Global Public Health: An International Journal for Research, Policy and Practice*, 2015a.
88 Vu, Thi Thanh Huong ‘Understanding Children’s Experiences of Violence in Viet Nam: Evidence from Young Lives’, Innocenti Working Paper 2016–26, UNICEF Office of Research, Florence, 2016.
89 Bronfenbrenner called this the “chronosystem”, see, for example: Berger, K.S. *The developing person through childhood (6th edition)*, Worth Publishers, New York, 2012.

a local NGO’s 14 community-published books (as well as raw materials such as narratives, poems, drawings and workshop notes) in four local languages (Shona, Ndebele, Tonga and English) from children across Zimbabwe helped explain, for example, how poverty, food scarcity, migration and organized crime at border posts put children in a web of risks of violence (ACDTP, 2016). Within the Young Lives sub-qualitative, longitudinal data, we witness children’s changing responses to violence and how gender roles consolidate and transform over time. Ravi, as a young boy, experiences multiple forms of violence including: witnessing domestic violence against his mother (at age 9), experiencing emotional and physical violence at the hands of his employer while serving as a bonded labourer (age 11), receiving beatings from his father for abandoning abusive labour (age 12) and attempting to stop domestic violence against his married sister (at age 16)—all this time vowing never to beat a woman or his wife. Now married (at age 20) he speaks of his wife:

She gets a beating... I hit her when she tells anything... she won’t keep quiet [after the quarrel], she keeps muttering to herself... she just nags, I get angry (Morrow and Singh, 2016).⁹⁰

In Viet Nam, a young boy named Huu, too frightened to take action to protect his mother who is beaten, reflects on how he “acted like a girl”, confirming the importance of gendered perceptions at a young age (Thi Thanh Huong Vu, 2016). The findings show that thoughtful approaches to data collection that include children as central to this process generate better explanations as to why, when, how and under what conditions violence or protection from violence occurs in children’s lives.

KEY TAKEAWAY: Qualitative inquiry and analysis should be further promoted within the field of violence prevention – on its own or as part of a mixed-methods approach – to ensure meaningful data interpretation of the social world, including the webs of interactions and the concepts and behaviours of people within it.

Data that drives change: Challenging assumptions around violence prevention research

In 2006, the United Nations Secretary-General’s Study on Violence against Children⁹¹ published what was then the most detailed understanding of the nature, extent and causes of violence against children. The study proposed clear recommendations for action to prevent and respond to it. Subsequently, these recommendations were widely endorsed and the field of violence prevention for children has greatly expanded. Less than a decade later, in 2014, at the invitation of the Government of Swaziland and with support from UNICEF and Together for Girls, an international meeting was held in Ezulwini, Swaziland, entitled the ‘Global Violence against Children Meeting: From Research to Action: Advancing Prevention and Response to Violence against Children’.⁹² The Swaziland event was a landmark meeting: the aim was to foster the exchange of knowledge about using research to mobilize an effective policy and programme response to violence against children at the national and international levels.

90 Morrow, V. and R. Singh, ‘Understanding Children’s Experiences of Violence in Andhra Pradesh and Telangana, India: Evidence from Young Lives’, Innocenti Working Paper 2016-19, UNICEF Office of Research, Florence, 2016.
91 https://www.unicef.org/violencestudy/reports/SG_violencestudy_en.pdf
92 www.unicef.org/protection/files/Swaziland_Global_VAC_Meeting_Report.pdf

The Global Meeting brought together more than 180 participants from 20 countries across Africa, Asia and the Caribbean to share evidence on and practices of prevention and response to violence against children. In a casual conversation over coffee, a well-respected colleague inquired about the recently launched activities around the *Multi-Country Study on the Drivers of Violence Affecting Children*. The colleague listened and then remarked: “Why are you studying the drivers of violence? We already know what drives violence!”

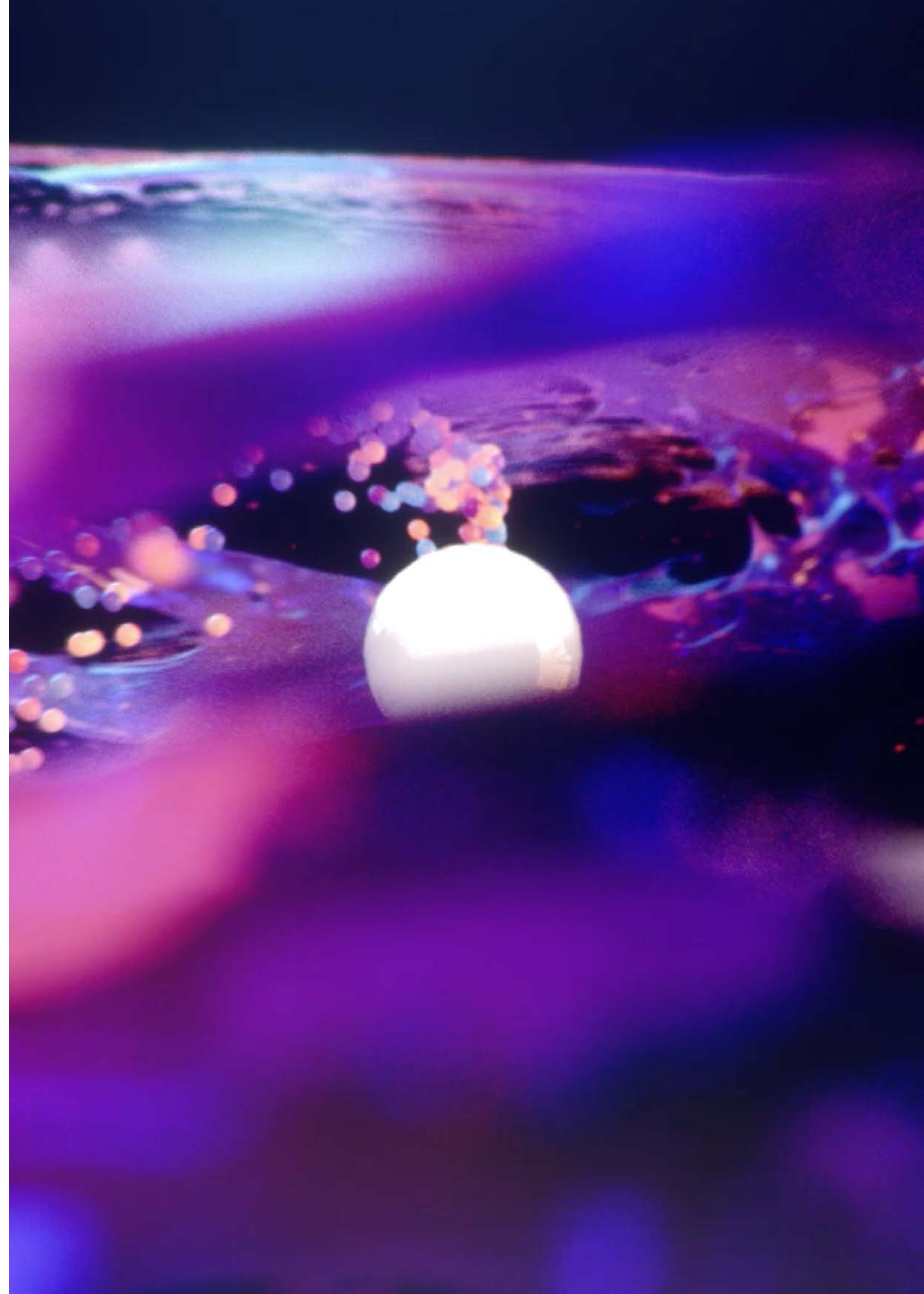
Three years later, the synthesis has shown that in fact we are still discovering what drives violence in countries around the world. Identifying factors such as poverty, rapid socio-economic change, migration or gender inequality remains abstract or academic if it does not reflect local knowledge. So, while the drivers of violence uncovered may indeed be something ‘we already know’, our national teams in Italy, Peru, Viet Nam and Zimbabwe insisted on pushing further—on contextualizing and adapting their own understandings of what drives violence in order to respond appropriately. In doing so, they successfully challenged a number of myths surrounding violence prevention research. It is our hope that this ‘myth-busting’ will serve to guide future investments in violence prevention research.

Assumption 1: We must convince decision makers to use data.

Decision makers, at least in Italy, Peru, Viet Nam and Zimbabwe, have all used their data to drive change. By keeping data in-country and building the capacity within government statistics offices and among local researchers, data analysis and interpretation can be a transformative experience. During the research process, the teams in Italy discovered they had a dearth of data on violence prevention; in Viet Nam, the government realized its violence prevention campaigns might be based on incorrect messaging; in Peru, decision makers pushed for new theory to explain the ‘mythology’ of violence embedded in the country’s history; and in Zimbabwe, the government has acknowledged the relevance of violence prevention research and is now committed to integrated programming that combines cash transfers, violence and adolescent well-being. Each of these countries has used the data they analysed to make positive change.

Assumption 2: Data collection systems on violence – including those that are nationally representative – are politically marginalized or non-existent.

While each of the countries in the Study had at least one nationally representative data set addressing violence, no single study (except for the violence study in Zimbabwe) was focused entirely on violence. Approaching existing data with a mind open to understanding children’s lives is important. Our teams mined existing surveys for questions related to violence in what we termed ‘green research’ as secondary data analysis ‘recycled’ previous research investments. We triangulated these findings with other research studies to explain phenomena. In Young Lives countries, agreements were made to add violence-related questions to the next round of the surveys making them even more relevant. Data exists in most cases, even in countries that claim they have no data on violence; however, certain easily transferable skills may be required to help uncover that data. Finally, nationally published PhD dissertations can offer insights that are typically overlooked. The study process proved that most countries have data on violence and, in the process of discovery, the data is naturally pulled from its said ‘political margins’ to the centre of discussion and debate.



Assumption 3: The quantity and diversity of data on VAC can be overwhelming for policymakers.

In fact, policymakers are not alone—the use of multiple data sources is a heady process and takes time. This study was designed to take 12 months but recruiting national consultants, determining the violence research landscape, accessing the data sources, training in research methods and maintaining the integrity of the human-centred design process took three times as long. Policymakers were hardly overwhelmed; on the contrary, they asked for more: more training, more instruction, and more data synthesis and writing workshops. The evidence generated, in its multiple forms, has provided the impetus for national governments to speak confidently about their findings knowing that these are corroborated by years of research from diverse disciplines and using different approaches to understand a complex social problem.

Assumption 4: Agencies that contract or deliver services are not staffed to substantively participate in and undertake research.

While most senior child protection managers are not researchers by training, they do understand the solutions-oriented approach that framed this work but often do not have the evidence to inform their proposed programming. The staff with whom we partnered – both in the UN system and among NGOs and CSOs – were consistently receptive to assistance in finding the right research partners, facilitating engagement with the steering committees, and providing content-specific support and review of all major products. In some countries, Child Protection staff at UNICEF reached out to colleagues in other sections such as Monitoring and Evaluation and Social Policy—creating an important internal cohesion and bringing a mix of skill sets to the process. Regional offices also played an important support role, encouraging other countries to join the process and supporting training workshops that reinforce regional learning. In fact, the ‘drivers’ research methodology has proved to be highly user-friendly. Eight other UNICEF country offices have now engaged in a parallel ‘Research to Policy and Practice Process’ (R3P; See Annex C), effectively drawing on the Study’s documentation of methodology and approach (www.unicef-irc.org/research/pdf/440-TOOLKITstep-by-step_28Sept2016_OK.pdf).

Assumption 5: As part of the Sustainable Development Goals, data is being collected to understand and respond to violence—but governments lack the capacity and/or will to do so.

In 2015, world leaders made a commitment to end all forms of violence against children by 2030, as part of the Sustainable Development Goals (SDGs). This moment presents an historic opportunity to unite the world behind a global, national and local movement to protect the world’s most precious asset – its children. Findings show that when national processes are respected, change can happen. Governments in Italy, Peru, Viet Nam and Zimbabwe are poised to respond to these commitments. There are indications that the nationally led research process described here is being replicated, for example with Together for Girls’ (discussed below) recent award from the World Bank to “help build in-country capacity for analyzing data from the Violence Against Children Surveys, led by CDC as part of the Together for Girls Partnership, contributing to a better understanding of how violence and gender interact across the lifespan.” (Together for Girls newsletter, 8 May 2017)

The pathway ahead: The growing global movement to end violence

Moving governments into developing and sustaining responsible and effective violence prevention activities has become a global priority. The prevention of violence affecting children is one of the core elements of UNICEF’s 2014–2017 Strategic Plan and is an issue gaining greater visibility and traction as the evidence base grows. Violence prevention and response also figure prominently in UNICEF’s emerging 2018–2021 Strategic Plan. Parallel to this study, in 2013, UNICEF launched a global campaign – #ENDviolence – calling on the global community to step up efforts to prevent and respond to violence affecting children. In early 2014, the organization selected violence affecting children as one of the two main ‘evidence themes’ to be prioritized within its child protection work over the 2014–2017 period. In 2015, even more progress was made when violence indicators were made part of the SDGs.⁹³ Findings from this research are timely.

Importantly, other global initiatives seeking to improve the prevention of and response to violence against children are contributing to a growing body of research and evidence—each with its own focus. These include: **Together for Girls**⁹⁴, a global public-private partnership focused on sexual violence; the **KNOW Violence in Childhood**⁹⁵ global learning initiative, harnessing learning and action across boundaries, stimulating global advocacy and encouraging greater investment in prevention; and finally **What Works to Prevent Violence Against Women and Girls**⁹⁶, sponsored by the British government and funding innovative approaches to violence prevention.

Most recently, the **Global Partnership to End Violence against Children**⁹⁷ and its associated fund were created to build on all of these initiatives. The Global Partnership’s goal is to support governments in achieving the ambitious undertaking of preventing violence in every country, every community and every family worldwide. In doing so, it is reinforcing and further mobilizing a powerful movement behind a common strategy for building and sustaining political will to end violence against children. It aims to strengthen collaboration between and among national governments and civil society in order to accelerate action to end violence at global, regional, national and local levels.

The *Multi-Country Study on the Drivers of Violence* has contributed to what is now recognized as a global movement to end violence affecting children. Among the eleven countries who have officially adopted the methodology and approach—five of these are ‘Pathfinding Countries’ within the Global Partnership and five more are in the process of applying. The study played a significant role in making violence visible and in assuring governments in different corners of the world that they do not stand alone in their efforts to reduce and ultimately eliminate the everyday violence that children experience. It also provided a relatively low-cost and human-centred alternative model to costly surveys that assess the scope of violence but without examining the drivers that determine it. The task now is to ensure that in this age of measurement and evidence, we continuously and critically examine the ways in which we count and construct the complex social phenomenon of violence affecting children: placing recognition of process and power at the heart of our research endeavours.

93 <https://sustainabledevelopment.un.org/?menu=1300>

94 www.togetherforgirls.org

95 www.knowviolenceinchildhood.org

96 <https://www.whatworks.co.za/>

97 www.end-violence.org/



ANNEX A: STUDY METHODS

Table A1: Multi-Country Approach compared to Traditional Systematic Review Approach

Traditional Systematic Reviews ⁱⁱⁱ	Multi-Country Systematic Review Approach
1. Identify the review question	1. Clarify and agree on scope of the review with the National Steering Committee (led by government) including identifying the scope of review parameters.
2. Search for primary studies, using clear predefined inclusion and exclusion criteria	2. Search for relevant evidence, refining inclusion criteria – especially for grey literature in light of emerging data.
3. Appraise quality of studies using a predefined and validated critical appraisal checklist, considering relevance to research question and methodological rigour.	3. Appraise ‘quality’ of studies using a quality assessment tool, which balances qualitative and quantitative studies using pre-defined categories as guides to assessing ‘quality’. Studies not meeting a quality threshold are excluded from the analysis.
4. Extract standard items of data from all primary studies using template or matrix.	4. Extract standard items of data using a variety of tools including a matrix of variables as well as mapping findings according to age and gender and socio-ecological levels.
5. Synthesize data to obtain effect size and confidence interval and/or transferable themes from quantitative studies	5. Synthesize data to achieve refinement of programme theory on drivers pathways – that is to determine what is driving violence for whom, how and what do we know about effective prevention.
6. Make recommendations, especially with reference to whether findings are definitive or whether further research is needed.	6. Collaboratively write up the synthesis findings with national scientific lead authors.
	7. Engage in action analysis with government, national NGOs and academics to further unpack findings and develop recommendations for policy, practice and research. Additional studies are often also identified, added, analysed and synthesized at this stage through this iterative nationally led action analysis process.

ⁱⁱⁱ Column for ‘Traditional Systematic Reviews’ adapted from Wong et al., 2009

Figure A1: Systematic review flow

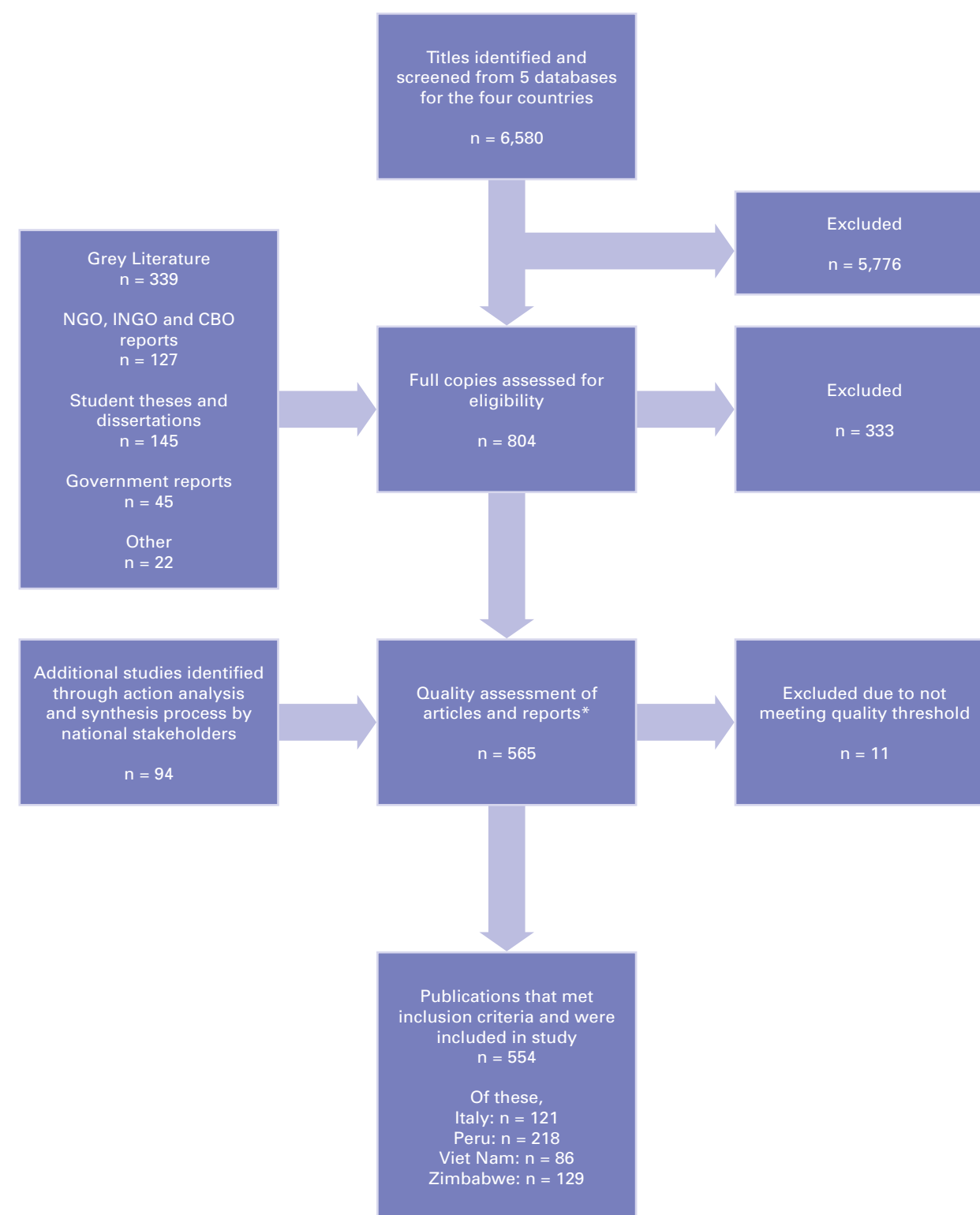


Table A2: Secondary data sets included in Study

Country	Name of data set	Organization(s)	Year	Sampling (method)	Sample ("n" disaggregated by age/gender)	Main purpose of survey
Italy	<i>Vite in Bilico</i> ('Lives at Risk')	Istituto degli Innocenti (IDI)	2006	Retrospective study using a random stratified sample of women aged between 19 and 60 years administered face-to-face in households and over the telephone.	2,320 women aged 19–60 years	To explore how violence in childhood predicts educational, mental health and other outcomes for women in adulthood.
	<i>La violenza contro le donne dentro e fuori la famiglia</i> ('Violence against women')	Istat	2014–2015	Mixed-methods study using a random sample of women aged 16–70 years. Data collection took place over 7 months in 2014. The majority of interviews (85%) were conducted by telephone using CATI (computer assisted telephone interview), while the remaining were completed in households using CAPI (computer assisted personal interview).	24,671 women aged 16–70 years	To investigate the prevalence of violence against women, characteristics of victims and perpetrators, the context in which it occurs, possible risk and protective factors, the social costs of violence, and the experience of sexual and physical violence before the age of 16.
Peru	ENARES (National Survey on Social Relations)	National Institute for Statistics and Informatics (INEI)	2013, 2015	Nationally representative school-based survey using a probabilistic sampling design, multistage areas and three stages. In 2013, 112 public and private primary schools and 91 public and private secondary schools were included, from which participants were randomly selected. Response rate was 99.9%. In 2015, 113 public and private primary schools and 92 public and private secondary schools were included, from which participants were randomly selected. Response rate was again 99.9%.	2013: 3,076 children and adolescents aged 9–17 years 1,587 aged 9–11 years 1,489 aged 12–17 years 1,568 boys 1,508 girls 2015: 3,102 children and adolescents aged 9–17 years 809 girls aged 9–11 years 793 males aged 9–11 years 715 girls aged 12–17 years 785 boys aged 12–17 years	To learn about the quality of children and adolescents' social settings in urban and rural Peru, and specifically, the presence of violence.

Country	Name of data set	Organization(s)	Year	Sampling (method)	Sample ("n" disaggregated by age/gender)	Main purpose of survey
Viet Nam	SAVY (Survey and Assessment of Vietnamese Youth: Rounds 1 and 2)	Government Statistical Office (GSO)	2003, 2009	Sampling methods for SAVY 1 and SAVY 2 were the same. Multi-stage and stratified sampling methods, using the 2002 (SAVY 1) and 2008 (SAVY 2) Viet Nam Household Living Standards Survey as the sampling frame. Both rounds were nationally representative. The response rate for SAVY 1 was 75.9% and about 80% for SAVY 2.	SAVY 1: 7,584 respondents aged 14–25 years 3,831 females 3,753 males SAVY 2: 10,044 respondents aged 14–25 years 4,981 females 5,093 males	Adolescent health survey
Zimbabwe	NBSLEA (National Baseline Survey on Life Experiences of Adolescents)	ZIMSTAT	2011	Two-stage cluster sampling using a nationally representative sampling frame drawn from the 2002 Zimbabwe Population Census Master Sample. The household response rate was 92.9% for males and 91.5% for females.	2,410 respondents aged 13–24 years 495 females aged 13–17 years 759 males aged 13–17 years 567 females aged 18–24 years 589 males aged 18–24 years	To provide comparable national population-based estimates that describe the magnitude and nature of the problem of abuse experienced by children in Zimbabwe in order to bridge the data gap on VAC and to inform policies and programmes to better protect children
	Childline Zimbabwe	Childline Zimbabwe	2011–2014	The helpline tracks information from all contacts, made either through calls or drop-in centres. A call tracking database captures initial quantitative information about calls received, such as demographic information about the child caller, nature of the call received and details of the alleged perpetrator. Qualitative information is also gathered, including the counsellor's assessment of the level of concern. The drop-in centres primarily use a paper-based form to capture initial information (details about the reported child, description of the reported incident, etc.) and input this into an electronic database. When a report about abuse is received, either the helpline or drop-in centre social worker assigns a primary category (type) of abuse for the report. Social workers can also choose multiple categories of abuse if the child has experienced more than one type of victimization.	15,446 contacts made to Childline in 2014, of which 8,281 were reports of physical abuse, sexual abuse, emotional abuse, neglect or bullying. Of the reports made about abuse in 2014, 5,780 were about girls 2,511 were about boys 717 were about those aged 0–6 year olds 542 were about 7–9 year olds 874 were about 10–12 year olds 1,429 were about 13–15 year olds 637 were about 16–17 year olds	Childline is a not-for-profit community-based organization providing therapeutic and educational services to all children in the country under the age of 18.

Country	Name of data set	Organization(s)	Year	Sampling (method)	Sample (“n” disaggregated by age/gender)	Main purpose of survey
Viet Nam; Peru	Young Lives	<p>Funded by the Department of International Development (DFID) through the University of Oxford</p> <p>Viet Nam team is based at the Centre for Analysis and Forecasting at the Viet Nam Academy of Social Sciences</p> <p>In Peru, it is a partnership between the Instituto de Investigación Nutricional (IIN) and Grupo de Análisis para el Desarrollo (GRADE).</p>	2002–2013	<p>Two-cohort longitudinal study following approximately 12,000 children in Peru, Viet Nam, Ethiopia and two states in India. Using a multi-stage sampling procedure, children and their households were randomly sampled within 20 sites, which were selected following a semi-purposive sampling strategy in order to oversample poor areas. Four rounds of quantitative surveys of children, households and communities were conducted. The Older Cohort follows children born in 1994–1995 and interviewed at ages 8, 12, 15 and 19. The Younger Cohort follows children born in 2001–2002 and gathered information from children and their families at ages 1, 5, 8 and 12. Four rounds of in-depth qualitative interviews were been conducted with a nested subsample of YL children from both the Older and Younger Cohorts, their parents, teachers and community members. This takes place in 3 of the sites in Viet Nam, 4 in Peru and India and 5 in Ethiopia. Sites were selected to explore variations in location, ethnicity and social and economic circumstances. Within the sites, children were randomly selected from the larger YL sample.</p>	<p>Peru: 714 children in the Older Cohort 2,052 children in the Younger Cohort</p> <p>Viet Nam: 1,000 children in the Older Cohort 2,000 children in the Younger Cohort</p>	To investigate the drivers and impacts of child poverty and generate evidence to help policymakers design programmes.

Table A3: Variations in survey administration across data sets

Country/data set	Survey administration			Bias assessment
	Administered by interviewer?	Method of administration	Study site	
Italy / <i>La violenza contro le donne dentro e fuori la famiglia</i> (‘Violence against women’)	Y	<p>Telephone interviews with all 21,044 Italian women and 297 ‘foreign’^a women</p> <p>Face-to-face interviews with 3,420 ‘foreign’^a women</p>	Household for telephone interviews ^b ; Face-to-face interviews were conducted in a place of the participant’s choosing. 19.4% chose to conduct the interview outside the home	Increased confidentiality of telephone interviews may limit risk of interviewer or reporting biases, which may be present in face-to-face interviews
Viet Nam and Peru / Young Lives	N (unless children did not have the literacy skills to complete on their own)	Self-completed questionnaires	Household	In instances where an interviewer assisted, this could potentially result in under-reporting or social desirability bias, though this was more common in India and Ethiopia than in Peru and Viet Nam (Portlea and Pells, 2015).
Peru / ENARES (National Survey on Social Relations)	Y	Face-to-face	School	Some research has shown that school-based surveys may increase reporting for certain types of violence, including physical violence (Fang et al., 2014), but generalizations from these surveys should be made with caution as they exclude children who are not attending school or were absent on the day.
Viet Nam / SAVY (Survey and Assessment of Vietnamese Youth: Rounds 1 and 2)	Y	Face-to-face interviews	Household	Interviewer or reporting biases may be present.
Zimbabwe / NBSLEA (National Baseline Survey on Life Experiences of Adolescents)	Y	Face-to-face interviews	Household	Interviewer or reporting biases may be present.

^a ‘Foreign’ women were defined as those living in Italy without Italian citizenship; Face-to-face interviews were specifically conducted with this population in order to reduce communication difficulties when asking about sensitive topics.

^b The sampling frame included mobile telephone numbers as well as landline numbers, so the locations for those interviews are unspecified.

ANNEX B: VIOLENCE AND RISK FACTORS BY PLACE (HOME, SCHOOL, COMMUNITY)

Violence in the home

According to prevalence estimates across the four countries under study, boys and girls experience violence in the home – at the hands of parents and caregivers, family members including siblings, and intimate partners – more than in any other setting. For example, data shows that three out of every four children experience violent discipline in the home, which is consistent with global literature stating that violent discipline is the most frequently occurring form of violence against children in the home (MICS, 2014; Lansford et al., 2010).

Sexual violence against children is often difficult to study but prevalence data from Zimbabwe is nearly twice the global prevalence rate (Stoltenborgh et al., 2011). Peru is very near the global prevalence rate and both Italy and Viet Nam are lower, which is consistent with other studies from Asia and continental Europe (Stoltenborgh et al., 2011). Emotional violence frequently occurs in the home; while definitions vary widely, prevalence estimates range from 33 to 50 per cent of all children in the four countries (INEI, 2016; GSO and UNICEF, 2015; ZIMSTAT, UNICEF and CCORE, 2013). Data shows a higher prevalence of emotional violence in both Peru and Viet Nam than global prevalence rates.

Children may also witness domestic violence between parents as a form of emotional abuse (UNICEF, 2008). Data from the National Study on Domestic Violence in Viet Nam (NSDVVN) also highlights that domestic violence occurs in more than 58 per cent of households—where women report experiencing at least one type of physical, sexual or emotional violence from a partner (GSO, 2010). In Italy, a national survey conducted by Istat in 2014 estimated that 31.5 per cent of women between the ages of 16 and 70 had experienced physical or sexual violence during their lifetime, and that partners or former partners committed the most serious forms violence (62.7 per cent of rapes are committed by a current or ex-partner) (Istat, 2014). Children may also experience intimate partner violence within their own relationships. In Zimbabwe, nearly 30 per cent of adolescent girls reported experiencing emotional violence by a partner and 78 per cent of all sexual violence against adolescents was perpetrated by an intimate partner (ZIMSTAT, UNICEF and CCORE, 2013). When compared to national data in eight other countries in East and Southern Africa, Zimbabwe represents the highest prevalence estimate of adolescent relationship violence for the region (UNICEF, 2014).

Where information on certain types of violence experiences cannot be disaggregated or is not available for certain segments of the population (such as Italy) or where national surveys may not accurately reflect more taboo forms of violence (such as sexual violence), administrative sources such as child protection services or child helplines can be important sources of information on the scope and nature of violence against children. For example, no nationally representative survey data on emotional violence exists in Italy but a survey of children taken care of by social services found that 13.7 per cent of maltreated children have suffered emotional abuse (CISMAI study).

Risk factors exist at the individual, interpersonal level as well as at the community level. This increases risk for children and makes their relationships with adults and other children in the home environment more conducive to violence.

Risk factors related to vulnerability

Violence in the home was found to be prevalent among both older and younger children and both boys and girls; however, risk factors vary depending on gender and age. From nationally representative data, several examples emerge. Violent discipline in the form of physical punishment is used most frequently against very young children (ages 2–7) and most frequently against boys; this violent discipline has been shown to become more severe once the child reaches adolescence, presumably because of the child’s physical stature and ability to fight back. In terms of the prevalence of emotional violence, differences between boys and girls emerge across countries. In Zimbabwe, boys are more at risk of emotional violence and in Peru, girls are more at risk. In Viet Nam, different studies highlight that either girls or boys are more at risk. In Zimbabwe, more boys reported experiencing emotional violence (39%) than girls (29%) with younger adolescents (13–16 years old among both boys and girls) being significantly more likely to experience emotional violence than older adolescents (Chigiji et al. 2018). In Peru, the opposite gender pattern emerges, with females reporting higher prevalence of psychological aggression at home than males and both genders experiencing more emotional violence in the 12–17 year old age range (ENARES, 2015).

In line with global statistics, data shows that girls are more at risk of sexual violence, particularly in its most severe forms (i.e. forced or unwanted sex or touching). In Zimbabwe, about one in five 18–24 year old females reported unwanted sexual touching before the age of 18 (20.2%) compared to 5.6 per cent of males. Moreover, 9 per cent of females said they were forced to have sex before age 18 years compared to 0.4 per cent of males. As with all data, disaggregation by age and gender is important to understand differences that exist between boys and girls through the life course. For girls, sexual violence most frequently occurs around middle adolescence or the start of puberty (Mwadiwa et al., forthcoming; INEI, 2016); and for many girls, their first sexual encounter is forced or unwanted and most frequently at the hands of intimate partners (ZIMSTAT, UNICEF and CCORE, 2013) or a family member (García-Moreno et al., 2005). For girls in Zimbabwe, the majority of the sexual violence is perpetrated by intimate partners, whereas in Peru, of the 19.5 per cent of women who had experienced sexual violence before the age of 15 in Lima (unwanted touching or forced sexual activity), over half reported that the perpetrator was a family member such as their father or stepfather (53.6%; García-Moreno et al., 2005). For boys, the potential perpetrators of sexual violence are wide and vary by type of violence (Mwadiwa et al., forthcoming). Among boys in Zimbabwe, a relative was the most common perpetrator of pressured sex and physically forced sex before the age of 18 years among 18–24 year olds whereas intimate partners were more likely to be perpetrators of unwanted sexual touching among the same age group (ZIMSTAT, UNICEF and CCORE, 2013). Aggregate statistics on sexual violence may mask these differences.

Children from ethnic minority or immigrant groups have been shown to be at increased risk of experiencing violence in the home. This is, however, not a straightforward association and requires a careful examination of the structural and institutional drivers that interact with ethnicity and immigration status to understand the full picture (see more on this in Section 4, ‘Structural and institutional drivers of violence: Invisible forms of harm’). For example, in Viet Nam, analyses of data from a nationally representative study of young people show that minority ethnic children are more at risk of experiencing physical violence in the home (Loi, 2015) and severe punishment is more common in ethnic minority households (GSO, UNICEF and UNFPA, 2011). Some studies in Peru have suggested urban migrants are more likely to be rigid, authoritarian and reliant on corporal punishment (Olthoff, 2006; Cavnagoud, 2011). They may be “supercorrecting” in an effort to promote conformity to what they understand to be urban norms, or they may be reacting to fear of an unchartered social environment (Olthoff, 2006; Cavnagoud, 2011).

Migrant and ethnic minority children are also more likely to be taken into care by social services. For example, in Italy, a national survey which measured the number of children receiving social services in 2014 found that children of foreign parents were twice as likely to be taken into care as Italian children (CISMAI and Terre des Hommes, 2015). Under the law, when a child in Italy is declared ‘adoptable’ the parent’s authority is automatically suspended and a guardian is appointed to represent the child. Saletti-Salza (2010) found in a study of 7 of Italy’s 29 juvenile courts that between 1985 and 2005, Roma children were 17 times more likely than non-Roma peers to be declared adoptable. The author indicates that social workers, and by extension those in the judicial sector, often assume Roma adults are unable to adequately care for their children, often a result of parent s missing appointments with social workers. These cultural biases help explain the gross over-representation of Roma children in foster care or adoption (Ravnbøl, 2009).

Other factors such as orphanhood may make an individual child more vulnerable to violence. This was particularly evident in the data in the case of Zimbabwe where the HIV/AIDS epidemic has contributed to a large number of orphans. Analyses conducted specifically for this study with national data in Zimbabwe found that children who do not live with their biological parents were found to be at greater risk of sexual abuse, especially girls (Mwadiwa et al., forthcoming). This is broadly consistent with the global literature, especially for the East and Southern Africa region. A recent analyses of DHS data from 13 countries in sub-Saharan Africa found that having a father who died (paternal orphan), having both parents die (double orphan) and the absence of the father were significantly associated with experiencing sexual violence in the all-country analysis. Fewer findings reached significance within individual countries but in Zimbabwe, double orphanhood placed girls at risk of sexual violence (Kidman and Palermo, 2016).

Specific factors at the interpersonal level such as living with domestic violence also increased children’s risk of experiencing violence. The data shows the cyclical nature of domestic violence in the home such that parents who are victims of or who perpetrate violence were also more likely to have experienced violence during their own childhood. For example, in Viet Nam, a nationally representative survey of women aged 18 to 60 years revealed that when asked whether they had been beaten or sexually abused by their husbands, the strongest risk factor for recent victimization was victimization in childhood—of the woman, her husband, and/or their respective mothers (GSO, 2010). Similarly in Italy, children who witness fathers being violent with their mothers are more likely to perpetrate violence against their partners (Istat, 2015; Dipartimento Giustizia). Istat found that the probability of people to perpetrate intimate partner violence increases from 5.2 per cent to 22 per cent if they have witnessed their fathers being violent with their mothers and to 35.9 per cent if they have been physically abused by mothers (Istat, 2015). Peru’s DHS 2014 survey also has data to this effect, where 30 per cent of mothers with children ages 1 to 5 years old reported experiencing some form of physical and/or sexual violence by their husband or partner and 39 per cent of those also reported that their children witnessed this violence (INEI, 2015). Spousal violence is also often associated with physical violence against children as well as child neglect (Bardales and Huallpa, 2005; Benavides, Almonte and de León, 2015).

These findings are consistent with a review of global literature that shows there is considerable evidence of the co-occurrence of domestic violence with violence against children but the rate of overlap and strength of association between the two may vary (Herrenkohl et al., 2008). This review also highlights that experiencing both forms of violence may have a compounding effect on negative outcomes for children (Herrenkohl et al., 2008). The data from the global review shows conflicting evidence in relation to gender differences in long-term outcomes of witnessing domestic violence for

females and males. Our findings would support several studies, which have found that boys exposed to domestic violence may develop more aggressive and violent behaviours such as perpetrating intimate partner violence in the future. It is important to note, however, that not all children exposed to domestic violence will go on to perpetrate or become victimized in the future. Nevertheless, it still remains an important risk factor at the interpersonal level.

Parental alcohol abuse was found to be a significant factor associated with domestic violence in the home in both Peru (Blichtein-Winicki and Reyes-Solari, 2012) and Viet Nam (Nguyen, 2006; UNICEF, 2008). The Vietnamese Family Survey found that alcohol abuse was the leading reason why a husband would beat his wife (38% of reported cases; UNICEF, 2008). Similarly, in Peru, women whose husbands drink to a state of inebriation are seven times more likely to experience domestic violence (Blichtein-Winicki and Reyes-Solari, 2012). Competitive drinking by males begins in adolescence or even before and is linked to abusive sexual behaviour (Gálvez-Buccollini et al., 2008; Seinfeld and Galarza, 2014; see also Gúezmes, Palomino and Ramos, 2002; Alcalde, 2014; Chávez, 2010; Anderson et al., 2001). Bedoya and Espinoza (2015), using the Peru Young Lives sample, found that fathers’ violence against mothers while drinking negatively affected children’s cognitive development, agency and self-esteem.

At the community level, differences between urban and rural settings were found to make children more vulnerable to different types of violence in the home across three of the countries in the study, namely Zimbabwe, Peru and Viet Nam. MICS 2014 data from Zimbabwe shows that urban parents were more likely than rural parents to report using any violent discipline (either psychological aggression or physical punishment) against their children aged 1–14 years in the past month (ZIMSTAT, 2015). Conversely, violent discipline was more common among rural parents in Viet Nam, though the difference is less pronounced than in Zimbabwe (GSO and UNICEF, 2015). In Peru, similar to Viet Nam, 40 per cent of rural parents reported having punished their children by hitting or smacking them compared to 22 per cent of urban parents (INEI, 2014). About 12 per cent of urban parents reported having punished their children by slapping them compared to 8 per cent of rural parents (INEI, 2014). Global data also shows that violent discipline occurs in all families – both rich and poor and urban/rural (UNICEF, 2014).

Risk factors related to beliefs and norms

A social norms approach, which seeks to understand what a group of individuals deem to be typical and/or appropriate behaviour, is a necessary component to unpack the drivers of violence and intervene effectively. In this section we address four specific beliefs and norms at the individual and community levels that appear to shape children’s risk factors for violence:

- Parental beliefs about the necessity and effectiveness of violent discipline
- Beliefs about gender roles, particularly in relation to the acceptability of domestic violence
- Community norms contributing to codes of silence around violence
- Harmful traditional practices including sexual relations between relatives, child marriage and sex selection at birth

At the individual level, the pervasiveness of parental beliefs about the necessity and effectiveness of using violent discipline was a consistent risk factor for the use of violence against children within the home. For example, according to secondary analysis of the Multiple Indicator Cluster Survey (MICS4) data in Viet Nam (Cappa and Dam, 2013), caregivers' attitudes toward corporal punishment emerged as the strongest risk factor for violent discipline. Often these beliefs on the effectiveness of violent discipline stemmed from parents own histories of having experienced violent discipline as children as was found in a mixed-method study conducted in Hanoi (CSAGA, 2004). Children may also believe that violent discipline is justified by their behaviour as was found in the nationally representative Survey on Social Relations in Peru where nearly half of all children surveyed said corporal punishment by parents was sometimes justified (INEI, 2013). Qualitative data from Young Lives research on children's experiences of and response to violence in Peru also found that both parents and children justify violence as a way to teach children good behaviour, although children say it negatively affects their well-being at home and at school (Guerrero and Rojas, 2016).

This is consistent with global data that shows a high correlation between beliefs around the effectiveness of the use of corporal punishment and its use by parents (particularly mothers). A review of all available MICS data shows the high correlations between the beliefs in the effectiveness of corporal punishment and its use in countries across the globe (UNICEF, 2014). Moving beyond correlational data, recent longitudinal data from eight countries, including Italy, has shown that it is not beliefs alone but the combination of beliefs and views held by parents about the frequency and use of violent disciplinary behaviour by other parents in the community that actually predicts the use of violent discipline (Lansford et al., 2016).

Beliefs about gender roles have also been shown to be associated with both experiencing and perpetrating violence against children in the home. For example, many studies conclude that the root of intimate partner violence in Viet Nam is inequality in gender relations (GSO, 2010; Krantz and Nguyen, 2009; Pells, Wilson and Hang, 2016; Loi et al., 1999). Vietnamese social norms are slowly changing, but family relationships continue to be influenced by patriarchy and traditional notions of male and female roles within the family. Taoist and Confucian principles promote ideals of femininity that emphasize appearance, housework and gentleness, in contrast to male ideals of physical strength and hot temper (Dao The Duc et al., 2012). The idea that men are entitled to use violence to reproach their wives and children is deep-rooted in a portion of the Vietnamese population and is seldom condemned by the community (Le Thi Quy and Vu Manh Loi, 2004).

Some of the strongest data linking beliefs about gender norms and experiences of violence come from national Demographic and Health Surveys. For example, according to national studies in Peru (ENARES), Viet Nam (MICS 2010) and Zimbabwe (ZDHS 2010–11), women and girls aged 15 years and older who believe male partners are justified in beating their partners are more likely to report experiencing abuse (GSO, UNICEF and UNFPA, 2011; INEI, 2013; ZIMSTAT and ICF International, 2012). From these surveys, both adolescent boys and girls adhere to negative gender role stereotypes related to both sexual relations and justifications for physical intimate partner violence. This relationship between adherence to negative beliefs around gender norms and associations with both victimization and perpetration of violence during childhood is well documented in global literature.

Similarly, powerful risk factors for the perpetuation of violence in the home are community norms around speaking about violence or codes of silence. Abuse is often a hidden topic preventing children from accessing help or telling anyone and preventing adults from offering help and providing a sense of impunity to perpetrators. In Zimbabwe, for example, few children who experienced violence and

knew where to go for professional help actually sought it, with girls who experienced sexual violence much more likely to say they were afraid of getting into trouble or getting their abuser into trouble (ZIMSTAT, UNICEF and CCORE, 2013). In Peru, only one third of all sexual violence victims sought help from another person (most often their mother) and just 2 per cent sought help from professionals, such as the police or a doctor (INEI, 2016). Similar findings were found in Italy with family silence around issues of domestic violence (Bianchi and Moretti, 2006) and in Viet Nam with community norms around preserving family dignity. According to studies in Viet Nam, there is a strong emphasis on female virginity, family honour and community reputation, and girls who are raped are often blamed for it (GSO, 2010; Australian Aid and World Vision, 2014; UNICEF, 2010a). This contributes to a culture of silence and denial (MOLISA and UNICEF, 2011; Private Sector Partnership, 2014).

In two of the countries, specific harmful traditional practices in the home were identified particularly in relation to sexual relations between relatives, child marriage and sex selection at birth – all of which are risk factors especially for girls. For example, in Zimbabwe, some communities practice chiharu, where an elder sister's or aunt's husband can fondle or force sex with the younger sister or niece which increases girls' vulnerability to abuse. Child marriage is common in Zimbabwe and has declined little since 1988 (MICS, 2014). Roughly 30 per cent of women aged 20–24 years are married by age 18 and 25 per cent of girls aged 15–19 years are currently married and or in union (ZIMSTAT, 2015b). In Viet Nam, prenatal sex selection is seen as a decision within a couple and yet sons are preferred over girls. Because of this prenatal sex selection, there is an imbalance in the newborn sex ratio (United Nations and World Bank, 2005).

Risk factors related to quality of relationships, family structure and dynamics

Across all countries, early experiences of interpersonal violence of the parent/caregiver were found to be a significant risk factor for all types of violence experiences including emotional, physical and sexual. For parents, their own histories of violence influenced their current parenting in several ways. In Italy, women who had been abused expressed less confidence in the future, struggled to motivate themselves at work and tended to dwell on their failures rather than their successes. They were also less likely than non-abused women to say they felt confident in dealing with the challenges of everyday life and were often depressed, potentially affecting the psychological well-being of their own children (Oiu et al., 2015). Women who experienced sexual abuse also tended to have tumultuous relationships as adults and were twice as likely to be divorced compared to women who did not report abuse in their own childhoods (16% versus 8%) (Bianchi and Moretti, 2006). In Peru, parents who were physically and emotionally abused in childhood often resort to using violence to resolve conflicts including with their children (Gage and Silvestre, 2010; Benavides and León, 2013).

Specific configurations of the family unit, known as family structure, were found to increase risk for children in different ways across the four countries. These included parental death which resulted in single (loss of one parent) or double orphanhood (loss of both parents), living with extended family members as an orphan, parental divorce, separation or absence and also the inclusion of new adults in the family home such as step-parents. Analyses conducted specifically for this study with the nationally representative SAVY 1 and SAVY 2 data sets in Viet Nam found that adolescents aged 14–25 years whose parents had divorced, separated or who lived away from home, had significantly higher rates of experiencing injury from violence perpetrated by family members, partners or community members (Vu Manh Loi, 2015). A study by Nguyen (2006) found that adolescents from divorced families or who had lost one or both parents were at greater risk of emotional maltreatment by an adult relative. In Zimbabwe, absence of biological parents is a risk factor for girls experiencing

emotional abuse in childhood, and for boys, paternal death is a risk factor for emotional violence (Chigiji et al., forthcoming). Double orphanhood and maternal absence is also a risk factor for girls experiencing sexual abuse (Mwadiwa et al., forthcoming).

Parental emotional or mental tension resulting from adverse or demanding circumstances, often called family stress, was found to increase the risk of violence against children in all four countries. For example, in a study conducted with 2,388 families in Tuscany, researchers found that stressors experienced by parents including lack of employment income and health problems represent a risk for minor forms of physical punishment (Bardi and Borgognini-Tarli, 2001). In Viet Nam, parental unemployment is associated with increased risk of physical and sexual violence against children (Nguyen, 2006). In Peru, household poverty is often cited as a risk factor for violence, although issues such as stress on principal caretakers, competition for living space, the need to recruit children as assistants in household tasks and caretaking, and the sheer discomfort of daily living under conditions of scarcity were factors that were associated with poverty-related stress (Nóbrega, 2012).

Closely related to family stress are certain elements in the family context including family isolation, alcohol or substance misuse or lack of social support networks, which are also related to increased risk of violence in the home. For example, in Viet Nam, one study found that parents subjected to poor working conditions, with limited support networks, and those unable to afford childcare were more likely to be emotionally abusive to their children (Ruiz-Casares and Heymann, 2009). Analysis of data from Vite in Bilico, a retrospective study on the experiences of violence during childhood among 2,320 women in Italy, found that women who grew up in socially isolated families were five times more likely to report experiencing maltreatment during childhood (Bianchi and Moretti, 2006). Families characterized by social isolation have weak contacts with extended family and social networks and may suffer from hostile break ups between family members or may have scarce opportunities to seek help in times of hardship.

The quality of family relationships – often identified through bonding, warmth and ways of communicating with each other – was found to be associated with either risk or protective factors for violence in the home. For example, from the nationally representative study of women in Italy, women who said they had been abused as girls reported that the atmosphere of their own families when growing up had been characterized by tension and communication that was secretive and accusatory. They were overwhelmingly more likely to say they had been humiliated by family members when they were children and had witnessed domestic violence and other family fights (Bianci et al., 2005). Similarly, in Italy, quality of family relationships emerged as a key risk factor from a clinical study comparing parents (n=59) at high risk of maltreating their children (as measured by the Abuse Scale of Child Abuse Potential inventory Form VI – CAPI) and parents (n =59) at low risk of maltreating their children. This study found that parents who perceive their couple relationship as weak or not supportive have a higher risk of physically maltreating their children (Miragoli, Di Blasio, 2012).

Similarly, the quality of community relationships – often related to social networks and community support was found to be an important component in either preventing or encouraging violence against children. For example, in a study in Hanoi of 269 families, it was found that social networks may not necessarily always be a protective factor against abuse (Emery, Nguyen and Kim, 2014). This study found that social networks may provide normative support for maltreatment. Social support may only work to decrease child maltreatment when those providing the support hold norms that oppose maltreatment (Emery, Nguyen and Kim, 2014). Further research is required to understand how social networks impact upon violence against children in the home. Lack of any social support is also

a risk factor for violence. For example, in Italy, children in socially isolated families – those who have weak contacts with extended families and social networks – are five times more likely to experience maltreatment (Bianchi and Moretti, 2006).

The data on violence in the home shows that emotional, physical and sexual violence often begins in the home and puts children at risk of further violence in other settings. In fact, findings from the Multi-Country Study show that children are at higher risk inside the home than outside; this is in contrast to most scholars studying violence. The next two sections focus specifically on how these risk factors, measured at the individual, interpersonal and community levels, apply when examining violence within schools and in the community, respectively.

Violence at school

In most countries, children spend more time in educational settings than anywhere else outside of their homes. Schools can be sites of violence or places of safety and inclusion. The school environment can support and promote children's dignity, learning and development as well as challenge the factors that increase violence, such as negative gender norms. Creating safe, non-violent and inclusive schools is a significant global policy priority for the next 15 years through the SDGs. Violence within schools can include peer-to-peer violence in the form of bullying, physical fighting and sexual violence or teacher-to-student violence in the form of corporal punishment (including both physical and emotional violence) or sexual violence.

The strongest data on bullying comes from the Young Lives longitudinal study in both Peru and Viet Nam, which showed that indirect bullying, such as being humiliated or socially excluded, was one of the most prevalent forms of bullying among 15-year-olds (27% in Viet Nam and 32% in Peru), as was verbal bullying (20% in Viet Nam and 34% in Peru). Physical bullying was the least prevalent, with 7–8 per cent of 15-year-olds reporting they had been hurt physically or punched, kicked or beaten up in either Viet Nam or Peru. There is also strong data on bullying from Italy, which takes part in the transnational Health Behaviour in School-Aged Children (HBSC) study. Trend data from the 2002, 2006 and 2010 surveys indicates that there has been a decline in the prevalence of frequent bullying perpetration and victimization among both boys and girls aged 11, 13 and 15 years (Vieno et al., 2015).

Corporal punishment in schools is against the law in all four countries, with the exception of Zimbabwe where it can legally be used against boys but not girls. Despite laws against its use in schools, it still remains common. The strongest evidence of corporal punishment in schools also comes from the Young Lives longitudinal study, which found that corporal punishment in schools is more commonly inflicted on primary school children. Over half of eight-year olds in both Peru and Viet Nam had witnessed some form of it in the week before they were interviewed and nearly one in three children reported they had experienced corporal punishment themselves (Portela and Pells, 2015). A study in Danang, Viet Nam found that 27 per cent of 818 students interviewed reported being beaten by a teacher with a hand and 26 per cent reported being beaten by a teacher with an object in the semester before the survey (Martin et al., 2013). In Zimbabwe, the second most frequent perpetrator of physical violence against boys was a teacher (ZIMSTAT, UNICEF and CCORE, 2013). No data on the prevalence of corporal punishment in schools was found for Italy.

Risk factors existing at the individual, interpersonal level as well as at the community level can increase risk for children and make their relationships with adults and other children in the school environment more conducive to violence.

Risk factors related to vulnerability

As with violence within the home, children's vulnerability puts them at risk of violence in schools. Specifically, any individual characteristics that mark the child as 'different' make them more vulnerable to both bullying and corporal punishment in schools. For example, longitudinal data from Peru and Viet Nam shows that out-of-school children are more likely to be verbally and physically bullied, and poorer children are more likely to be physically bullied or have their property attacked (Pells, Portela and Espinoza, 2016). Qualitative data from Young Lives also indicates that ethnicity may make children vulnerable to bullying (Guerrero and Rojas, 2016; Viet Nam papers). A national school-based study in Peru had similar findings, showing that children who either overachieved or underachieved or those from ethnic minorities were more likely to experience peer violence (INEI, 2013).

Nicknames, insults, verbal harassment and attempts to humiliate strengthen some group identities and marginalize others. Having friends was not found to reduce the likelihood of being bullied (INEI, 2013). Ethnographic research in three lower secondary schools in the northern Vietnamese cities of Hanoi and Haiphong found that children often use the term 'meek' (hi n lành) when describing those they bullied (Horton, Lindholm and Nguyen, 2015). In Italy and Peru, children who identified as gay, lesbian, bisexual or transgender (LGBT) were also at an increased risk of bullying. Of 900 Lima men aged 18 to 24 asked to recall their school years, two thirds of the homosexual men but only 43 per cent of the heterosexual men said they had been the victim of bullying (Cáceres and Salazar, 2013). Many in the former group were bullied daily, especially during recess. Specific data on LGBT youth experiences of violence was not available for Zimbabwe or Viet Nam.

Vulnerabilities differ according to age and gender and these changes are especially visible in school environments. Examples were similar across country sites and show that bullying varies between genders. Boys are significantly more likely to experience physical bullying than girls in all countries (Pells, Portela and Espinoza, 2016; ZIMSTAT, 2014). Girls are less likely than boys to fight physically against those they dislike, but they sometimes ask their male friends to fight for them, reinforcing gendered stereotypes. This type of bullying is considered evidence of true love or friendship (UN Viet Nam, 2011). Groups of girls may also gang up to humiliate others using social media or taunting them in person (Elgar et al., 2013; Pells, Portela and Espinoza, 2016). In terms of age, findings show that corporal punishment occurs more frequently against younger children. At age eight, nearly one in three children surveyed in Peru and Viet Nam reported that they had experienced corporal punishment (Portela and Pells, 2015). This declines sharply among the same respondents at age 15 in both Peru and Viet Nam, when only one in five children surveyed reported having witnessed a teacher administering corporal punishment in the last week and less than 1 in 10 children had experienced it themselves in the past week (Portela and Pells, 2015).

One of the more frequently found risk factors relates to urban/rural differences in risk of violence in schools where findings varied by country. In Peru, for example, children from rural areas were more likely to report corporal punishment: 38.6 per cent of rural children reported corporal punishment at age eight compared to 27.3 per cent of urban children (Portela and Pells, 2015). In Viet Nam, by contrast, although the prevalence of corporal punishment appears similar across the country, statistical analyses of Young Lives data conducted for this study show that urban children report more corporal punishment than rural children at age eight (17.8% and 28.5%, respectively; Hang and Tam, 2013; Portela and Pells, 2015).

Fewer studies explore other community level risk factors associated with violence in school settings; however, there is a risk of violence for children walking long distances to and from school in rural

areas as identified in studies from Zimbabwe and Peru. According to a national survey in Zimbabwe, about 20 per cent of females first experienced sexual violence while travelling to or from school (ZIMSTAT, UNICEF and CCORE, 2013). Travelling to and from school is also dangerous for girls in rural Peru where in the Andes, long, solitary walks to and from school create a danger of sexual abuse for girls, and fear of this may persuade parents to take them out of school.

Risk factors related to beliefs and norms

Despite the use of corporal punishment being illegal in most of the countries under study, some teachers' beliefs continue to view corporal punishment as an effective way of imposing discipline in the classroom and shaping children's behaviour. For example, one study found that 40 per cent of teachers in four schools in Hanoi believed in the effectiveness of corporal punishment and said the threat of it made children study harder, follow rules, be polite, adopt good habits and self-regulate their personalities (CSAGA, 2004). Children, however, had differing views on the use of corporal punishment in schools. For example, while corporal punishment may be prevalent in Peruvian schools, only about 10 per cent of children in the National Survey on Social Relations (ENARES) thought it was legitimate (INEI, 2013). For the first time, with data analysed specifically for this study, longitudinal data has also shown that children's experiences of violence also have direct impacts on having lower 'foundation skills' of reading, maths and vocabulary in both Viet Nam and Peru (Portela and Pells, 2015).

In all four countries, data shows norms around silence or not speaking out about or addressing violence in school settings. In a study of 1,496 children aged 12 to 18 years and 1,266 parents in Italy, only one in five boys who experienced bullying spoke to a parent about it, and only 3 per cent of parents advised their child to tell their teacher (Eurispes and Telefono Azzurro, 2011). In the Young Lives study of bullying in Viet Nam and Peru, it was found that students are more likely to speak out about violence, especially bullying, in school settings if they believe that it is seen as unacceptable and if they feel that teachers will deal with it constructively. Studies highlight that this may not be the norm and, as such, issues around bullying are generally not addressed (Pells, Portela and Espinoza, 2016; Horton, 2011). In both Peru and Zimbabwe, the belief that corporal punishment is an effective means of discipline also contributes to silence around school violence. Though parents may be aware of their children experiencing corporal punishment at school, they may support its use as they consider it to be a vital part of education and discipline; their response then discourages children from reporting cases of physical violence to school authorities (Guerrero and Rojas, 2016; Shumba, 2001; Chikwiri and Lemmer, 2014). In Viet Nam, boys seldom report bullying because they fear being seen as 'meek' (Horton, Lindholm and Nguyen, 2015). Girls tend to remain silent because their very presence and gentle demeanour is supposed to help control the behaviour of boys. Teachers often remain silent out of the desire to maintain their own positions of authority (Horton, 2011).

Risk factors related to teacher/pupil relationships and home/school linkages

The quality of student/pupil relationships was found to be an important risk or protective factor, particularly in Viet Nam. For example, the nationally representative SAVY data, which included two surveys with 7,584 young people aged 14–25 years in round 1 and 10,044 in round 2, found that children who experience less violence are far more likely to feel connected to school—meaning they say they work hard, trust their teachers to be fair and have ambitions to go to university. In Peru, the student/pupil relationship in school was impacted by children's experiences of violence at home. For example, Young Lives longitudinal qualitative data showed that domestic violence at home caused

rifts in children's ability to trust their parents, teachers, school authorities and themselves. Many children become trapped in a vicious cycle of poor school performance resulting in punishment at home, which results in further diminished school performance (Guerrero and Rojas, 2016). Other qualitative data from Peru with 10 teachers and 8 auxiliary education teachers also shows that early childhood teachers, including those with professional degrees and long experience, attribute children's aggressiveness in school to their experiences at home or to biological and genetic factors rather than factors they could control such as classroom organization or the behaviour of teachers (Loza and Frisancho, 2010). Teachers who conflated aggression and violence generally failed to identify indirect or subtle aggression or connect their pupils' conduct with their own actions. This left them few tools with which to prevent violence or intervene when it erupted.

Particularly in Viet Nam, academic stress from families was a risk factor that increased children's experiences of school-based violence. In a study of 1,648 students aged 16–18 years in three regions of Viet Nam, high academic stress placed on children by their families was associated with being a victim of emotional bullying, physical bullying and cyberbullying among both male and female students (Pham, 2015). Qualitative data from the Young Lives study in Peru also found that some children were physically punished by their parents for receiving bad grades (Guerrero and Rojas, 2016). Violence at home also negatively affects school performance (Fry et al., 2016; Bedoya and Espinoza, 2015). This may be an emerging research area to further explore in other countries in relation to particular school-based structures and expectations.

In addition to influencing relationships with teachers, the quality of family relationships/family context also directly impacted children's experiences of violence in schools, showing how important it is to further understand the home-school link and children's experiences of violence in both settings. For example, in Zimbabwe the lack of family support and children's experiences of severe punishment at home were risk factors for bullying behaviour at school (Ncube, 2013). In Italy, children who experience physical or sexual abuse or neglect at home are at greater risk of both becoming bullies at school and being bullying victims. Other risk factors for bullying victimization and/or perpetration include parental psychological distress, parental health problems, low parental education and skills and low parental income (Bianchi and Moretti, 2006; Caso et al., 2011; Bardi and Borgognini, 2001; Baldry, 2003; Arace et al., 2013).

While community-level risk factors related to violence against children in schools were found to be somewhat under-researched in this review across four countries, it is likely that like the home-school link, a similar school-community link may increase risk or protective factors for violence. Longitudinal evidence from Italy, for example, found that bullying perpetration in school was correlated with other types of aggression in the community such as street violence and sexual harassment (Menesini and Nocentini, 2008).

Violence in the community

Community violence refers to acts of violence affecting children in any space used or occupied by children other than homes, schools and institutions (Pinheiro, 2006). Community is not only a physical space, but also a social environment (Pinheiro, 2006). This section explores different forms of exploitation and other forms of violence occurring outside the home and school settings and therefore in the community. Exploitation can occur in different ways, which are often interrelated. This study identified three main types of exploitation across the four countries – sexual exploitation, trafficking and child labour. Online violence was also identified as an emerging area of concern

across all countries. For each topical area, we first provide a definition and present an overview on the prevalence, followed by a description of the risk factors.

Sexual exploitation

Children are victims of sexual exploitation when they take part in a sexual activity in exchange for something – whether it be money, food, accommodation, etc., or even the promise of a gain or benefit – and children are often persuaded or coerced through physical force or threats to engage in such activities (Greijer and Doek, 2016). Data on the frequency and magnitude of sexual exploitation comes primarily from administrative data in all four countries and is likely to be an underestimate of the true scope of this form of violence against children (Pinheiro, 2006). It is difficult to compare findings across countries because of the inconsistencies and gaps in the data, but in all countries, sexual exploitation and abuse remains a hidden but potentially growing form of violence against children. For example, in Italy, according to Eurostat data in 2012, a total of 124 children aged 12–17 years (122 female and 2 male) were identified and presumed to be victims of sexual exploitation. In Viet Nam, according to the Ministry of Labour, Invalids and Social Affairs (MOLISA), of the 31,000 sex workers that were estimated to be working in Viet Nam from 2003 to 2008, 14 per cent – or roughly 4,300 – were sexually exploited children under 18 years (UNICEF, 2010a).

Trafficking

Child trafficking is the recruitment and/or transport, transfer, harbouring and receipt of a child by others with the intent of exploiting the child for various purposes (Greijer and Doek, 2016). All four countries face the challenge of both internal and cross-border trafficking of children for the purposes of forced labour, sexual exploitation and forced marriage. Within this Study, this is most prevalent in Italy and Viet Nam. In Viet Nam, for example, some children are trafficked from rural areas into cities where they became involved in street hawking, begging, forced labour or sexual exploitation. Others cross national borders with promises of jobs but instead end up in a form of sexual exploitation, forced marriage and other exploitative forms of labour, all which are risk factors for further violence (Rushing, Watts and Rushing, 2005). Trafficking of children also occurs for forced marriages, particularly in Viet Nam. A 2014 study documented 500 cases of trafficking related to marriage involving 1,100 victims between 2008 and 2014 (UNODC, 2014). This report also found that one third of documented human trafficking cases between 2007 and 2010 involved children. In Italy, data from the Department of Equal Opportunities about child victims of trafficking gives an indication of what is likely a much larger problem. Between 2000 and 2012, 1,171 children were provided services as part of social reintegration projects (according to art. 18 of Dlgs. 286/98). Furthermore, projects carried out under art. 13 of the law against trafficking (law228/2003) included a total of 208 children from 2006 to 2012. However, it is crucial to note that case numbers can be misleading in terms of providing information on the scope and scale of the problem and are likely to severely underestimate the problem.

Child labour

Hazardous work that children are engaged in, often called “the worst forms of child labour”, includes physical, emotional and sometimes sexual violence against children (Greijer and Doek, 2016). In addition to being a type of direct violence in some circumstances, child labour is also a risk factor for all types of violence against children. In Viet Nam, for example, it is estimated that 16 per cent of children age five to 17 years are involved in child labour and there are approximately 20,000 street children, many of whom may have increased vulnerability to exploitative and/or hazardous child

labour work (UNICEF Viet Nam, 2014). Children work in parks, markets, bus and train stations, and near temples and tourist attractions. While some support themselves by pick-pocketing and petty theft from shops, many more sell newspapers, postcards and lottery tickets, beg, shine shoes, scavenge garbage, and serve as porters in markets (UNICEF, 2010a).

Child labour, especially in family businesses, is also common in Peru (Rodríguez and Vargas, 2009). Roughly 70 per cent of adolescents who work have dangerous or stigmatized occupations such as recycling waste from the street (Rodríguez and Vargas, 2009; Cavagnoud, 2011). In Zimbabwe, children are often coerced to work through the threat of violent punishment. Some categories of illegal work are themselves a form of violence, especially those categorized as the “worst forms of labour” including hazardous work or prostitution. According to the 2014 ZIMSTAT Child Labour Survey, half of children aged 5 to 17 years were engaged in economic activity in the week before the survey (ZIMSTAT, 2015a).

Online violence

While information and communication technologies (ICTs) such as the Internet and mobile phones are becoming increasingly important and beneficial in children’s lives, there are also several potential risks of ICT use, including exposure to disturbing or potentially harmful content such as violent images, cyber-bullying, sexual solicitation (‘online grooming’), circulation of child sexual abuse materials and live stream abuse (UNICEF, 2015). Few studies were found that explored violence online but it clearly is an emerging concern in all four countries, specifically cyber-bullying and Internet safety (Pham, 2015; Le et al., forthcoming). In Viet Nam, for example, UNICEF’s Digital Citizenship and Safety Survey asked children whether anyone had ever used the Internet or phone to bully, threaten or embarrass them. Fourteen per cent of respondents in urban areas and 20 per cent in rural areas indicated that they had experienced some form of bullying in the digital world. Of those, 40 per cent reported being cyber-bullied through gaming websites, 43 per cent from instant messaging/chat/calling mobile phones. Cyber-bullying via SMS and by receiving phone calls was three times higher for females than males (UNICEF, 2012). In a recent longitudinal study of 1,424 middle school and high school students, it was found that approximately 90 and 92 per cent of children who experienced cyberbullying at time 1 or time 2 respectively also experienced traditional forms of bullying (Le et al., forthcoming). Information and communication technologies also expose children to the risk of sexual abuse and exploitation (Australian Aid and World Vision, 2014).

Risk factors exist at the individual, interpersonal level as well as at the community level that increase risk for children and makes their relationships with adults and other children in the community more conducive to violence.

Risk factors related to vulnerability

Certain children may be more at risk of violence in the community due to their increased vulnerability. For example, the HIV/AIDS epidemic in Zimbabwe has contributed to the increasing number of orphans. While a recent systematic review and meta-analysis (Nichols et al., 2013), which included six studies in Zimbabwe, found that orphaned children are not at increased risk of physical or sexual abuse compared to non-orphans, nationally representative data from Zimbabwe identified in this study shows that girls aged 13–17 years who have lost either one or both parents are especially vulnerable to sexual violence (ZIMSTAT, UNICEF and CCORE, 2013). Children who do not live with their biological parents were found to be at greater risk of sexual abuse, especially

girls (Mwadiwa et al., forthcoming). In Viet Nam, poorer children may be at a higher risk of leaving school early to earn money to support their families, placing them at risk of child labour and sexual exploitation (MOLISA and UNICEF, 2011; Pells and Woodhead, 2014; ILO and IPEC, 2002).

Data from the four countries shows the incidence of different forms of community violence according to age and gender. Sexual exploitation is more prevalent for girls in all four countries. However, the Vietnamese Government Statistics Office notes a lack of official statistics or government records on boys (GSO, 2012), even though large numbers of boys are known to be involved in street begging, vending and other forms of child labour that put them at risk of multiple types of violence (MOLISA and UNICEF, 2011). Children are also increasingly vulnerable to sexual exploitation and trafficking during early to late adolescence (Save the Children, 2015). In terms of child labour, children are more likely to work as they grow older (ZIMSTAT, 2015a). Zimbabwean children work in domestic service, agriculture and mining, including gold mining, which is recognized as one of the worst forms of child labour by the International Labour Organization; in 2015, a similar number of boys and girls contacted Childline to seek help after being sexually, physically and emotionally abused by their employers (US Department of Labor, 2015).

At the community level, urban/rural differences are also present as risk factors that increase children’s vulnerability to violence in the community. In Viet Nam, rural children who migrate to cities for work may be more vulnerable to sexual exploitation and violence (Rushing, Watts and Rushing, 2005). Similar findings were identified in Zimbabwe where the Rapid Assessment Study of the Worst Forms of Child Labour in Zimbabwe completed in 2008 suggests that the unregulated nature of informal sector work in urban centres offers greater access to markets for children looking for livelihood opportunities but also increases their vulnerability to illicit activities and abuse and exploitation (Government of Zimbabwe Ministry of Labour and Social Services, 2011).

Risk factors related to relationships, family structure and dynamics

Early experience of violence or conflict, especially in the home, was a risk factor for different forms of violence in the community. For example, in a qualitative study of 51 children who were victims of sexual exploitation in five provinces, 47 children reported that they had experienced multiple adversities in their family, including rape, sexual abuse or domestic violence in the home before entering the trade (MOLISA and UNICEF, 2011).

While poverty is often cited as a key cause of child sexual exploitation, studies in Viet Nam have found that family dysfunction and past experience of physical, emotional and sexual abuse are also significant risk factors for sexual exploitation (Nguyen, 2006; UNICEF, 2008). Many child victims of sexual exploitation report being driven from their homes due to physical violence, family and household dysfunction, drug abuse and domestic violence (Australian Aid and World Vision, 2014; Save the Children, 2013; UNICEF, 2008; CEOP, 2011; Nguyen, 2006; MOLISA and UNICEF, 2011). Limited data exists from the other countries but many so-called ‘chicos pandilla’ (‘troublemakers’), who often start fights in neighbourhoods in Peru, come from violent, chaotic neighbourhoods, extremely marginalized families and identify with stigmatized sectors of Peruvian society (Munar, Verhoeven and Bernal, 2004).

Family financial stress was also identified as a risk factor. For example, in Viet Nam, kinship obligations and the need to support their families are sometimes cited as the reasons girls entered the commercial sex sector. Some children reported that their parents encouraged, forced

or even deceived them into engaging in a form of sexual exploitation for economic purposes (ILO and IPEC, 2002; MOLISA and UNICEF, 2011).

Specific types of family structure, namely the absence of family through orphanhood, children living or working on their own on the street or during migration is also a risk factor for violence against children in the community as identified in studies across the countries. In Viet Nam, for example, boy victims of trafficking reported lack of parental care (GSO, 2012). Adolescents whose parent or parents had died were at increased risk of emotional violence (Nguyen, 2006). Similarly, in Zimbabwe, orphaned children are more likely not to attend school and are at risk of sexual exploitation and trafficking. In Italy, the absence of the family is a key risk factor as identified through the Parliamentary Commission on Childhood and Adolescents which showed the links between the presence of unaccompanied minors in migrating flows across Europe and increased risk of sexual exploitation by traffickers (Camera dei Deputati, 2012; Save the Children Italia, 2013). As far as is known, nearly all sexually exploited children in the context of travel or tourism in Italy are foreign born (Department of Equal Opportunities, 2014). According to official data from the Ministry of Social Policies and Labour there are 13,369 unaccompanied minors reported to the authorities (at 31 January 2015). Children living and working on the street, in the absence of family, are also vulnerable to sexual violence. For example, in Zimbabwe according to a report by Save the Children Norway, Childline and Streets Ahead (2009), 25 per cent of boys living and working on the streets of Harare were victims of sexual abuse; only 8 per cent of these boys reported that the perpetrator had been arrested.

The quality of family relationships, including being able to discuss sexual issues, was found to be a risk factor for online abuse. In Viet Nam, an Australian Aid and Word Vision (2014) study found that many parents and teachers fear that sex education encourages sexual experimentation and inappropriate behaviour. Most children therefore obtain information of dubious accuracy from informal channels such as peers, television and the internet. Awareness of new risks associated with online sexual exploitation and grooming is low amongst both children and their parents (Australian Aid and World Vision, 2014). Online abuse was an under-researched area in all four countries and various factors at the interpersonal level, such as the quality of family relationships, should be explored through further research.

The declining quality of community relationships, primarily through diminishing community cohesion and values, was also found to be a risk factor in studies across the countries (though community relationships can possibly also be a protective factor). In Viet Nam this was seen to be influenced by rapid social changes (Pells and Woodhead, 2014); in Peru, studies highlighted the mining centres (IPEC, 2007b), migration routes, tourist attractions and gold rush towns as places that increase the risk of violence against children given the lack of community structures for surveillance and support (Mujica, 2014). In Zimbabwe, neighbours are frequent perpetrators of sexual abuse against both girls and boys (ZIMSTAT, UNICEF and CCORE, 2013). Adolescent girls in Zimbabwe who say they have people in the community whom they trust are less likely to experience unwanted touching, though it is impossible to determine the direction of this relationship from the cross-sectional data (Mwadiwa et al., forthcoming).

Risk factors related to beliefs and norms

There are specific beliefs held at the community level that increase overall risk of violence for children. One is that sexual exploitation is not considered a serious issue. This lack of awareness and recognition among community members presents a major risk to both boys and girls (Australian Aid and World Vision Australia, 2014), affecting both documentation and response of local authorities toward trafficking (GSO, 2012).

Community beliefs— notably among adults with power – can also be used as a control mechanism against children who are trafficked. For example in Italy, trafficked Nigerian girls are threatened with retribution against themselves and relatives at home if they try to escape or fail to pay back their debt; this includes the manipulative use of traditional spiritual beliefs and practices to maintain control over the girls and their families (Save the Children, 2015).

As with violence in the home and schools, social norms particularly around gender were prevalent. For example, in Viet Nam, the strong emphasis on female virginity, family honour and community reputation leads to the widespread propensity to blame girls for premarital sex, even when they are victims of rape and sexual exploitation (GSO, 2010; Australian Aid and World Vision Australia, 2014). Similarly, in Zimbabwe, the suspected loss of virginity of a young female, including as a result of rape, may be perceived as a disgrace (Hodzi, 2016), which can contribute to girls’ fears about getting into trouble for reporting abuse, or getting their abuser into trouble (ZIMSTAT, UNICEF and CCORE, 2013).

ANNEX C: RESEARCH OUTPUTS AND FIELD-FRIENDLY PRODUCTS

INNOCENTI PUBLICATIONS for VIOLENCE

Innocenti Research Papers

Understanding Children's Experiences of Violence in Viet Nam: Evidence from Young Lives

Vu Thi Thanh Huong, Innocenti Working Paper no.2016-26

www.unicef-irc.org/publications/series/15

Understanding Children's Experiences of Violence in Ethiopia: Evidence from Young Lives

Morrow, V. and Sing, R., Innocenti Working Paper no.2016-25

www.unicef-irc.org/publications/series/15

Understanding Children's Experiences of Violence in Andhra Pradesh and Telangana, India: Evidence from Young Lives

Pankhurst, A., Negussie, N. and Mulugeta, E., Innocenti Working Paper no. 2016-19

www.unicef-irc.org/publications/series/15

Understanding Children's Experiences of Violence in Peru: Evidence from Young Lives

Guerrero, G. and Rojas, V. Innocenti Working Paper 2016-17

www.unicef-irc.org/publications/865

Experiences of Peer Bullying among Adolescents and Associated Effects on Young Adult Outcomes:

Longitudinal evidence from Ethiopia, India, Peru and Viet Nam

Pells, K., Ogando Portela, M.J. and Espinoza Revollo, P., Innocenti Discussion Paper no. 2016-03

www.unicef-irc.org/publications/863

Innocenti Research Briefs

The Multi-Country Study on the Drivers of Violence Affecting Children: A Child-Centred

Integrated Framework for Violence Prevention

Maternowska, M. C. and Potts, A. (2017)

<https://www.unicef-irc.org/research/pdf/448-child-centered-brief.pdf>

Snapshot: The multi-country study on the drivers of violence affecting children. A cross-country

snapshot of findings

Maternowska, Mary Catherine; Potts, Alina; Fry, Deborah (2016)

www.unicef-irc.org/e-book/THE-MULTI-COUNTRY-STUDY-PAGER/HTML

Undermining Learning: Multi-country longitudinal evidence on corporal punishment in schools

Jones, H. and Pells, K., Innocenti Research Brief no. 2016-06

www.unicef-irc.org/publications/804

Innocenti Op-eds, Commentaries and Blogs

Tanzania to Integrate Violence Prevention for Women and Girls

Catherine Maternowska, Innocenti web article

www.unicef-irc.org/article/1370

Bringing Data on Violence out of Hiding:

Peru and the Multi Country Study on Violence Affecting Children

Catherine Maternowska, Innocenti web article

blogs.unicef.org/evidence-for-action/bringing-data-violence-shadows-peru-25-year-journey

Violence against Children and Violence against Women Intersection

Catherine Maternowska, Innocenti web article

www.unicef-irc.org/article/1370

Bringing Data on Violence out of the Shadows in Peru: A 25 year journey

Catherine Maternowska, UNICEF Evidence for Action Blog

blogs.unicef.org/evidence-for-action/bringing-data-violence-shadows-peru-25-year-journey

Investigating Drivers of Violence Affecting Children in Viet Nam

Catherine Maternowska, UNICEF Evidence for Action Blog

www.blogs.unicef.org/evidence-for-action/investigating-drivers-of-violence-affecting-children-in-viet-nam ; www.unicef-irc.org/article/1489

Children Reflect on the Drivers of Violence in Viet Nam

www.youtube.com/watch?v=bHjECW0I36Q

EXTERNAL PUBLICATIONS

Special Issue in *Vulnerable Children & Youth Studies*

The Multi-Country Study on the Drivers of Violence Affecting Children: Giving Complexity

Clarity (2018)

Maternowska, M.C., Fry, D., Potts, A., & Casey, T. (Eds.) Vol. 13. No. S1.

Situating the drivers of violence: Building a global movement through national engagement, evidence and action

Boyden, J., Jewkes, R., Ligiero, D., Subrahmanian, R., & Taylor, H.

The Multi-Country Study on the Drivers of Violence Affecting Children: An overview

Maternowska, M.C., & Fry, D.

A socio-ecological approach to children's experiences of violence: Evidence from Young Lives

Pells, K., Morrow, V., Maternowska, M.C., & Potts, A.

Applying the child-centred and integrated framework for violence prevention: A case study on physical violence in Viet Nam

Le Hong Loan, Vu Thi Le Thanh, & Maternowska, M. C.

The Multi- Country Study on the Drivers of Violence Affecting Children in Peru: The process and its outcomes

Ames, P., Anderson, J., Martin, A., & Potts, A.

The Multi-Country Study on the Drivers of Violence Affecting Children in Zimbabwe: Using a mixed methods, multi-stakeholder approach to discover what drives violence

Izumi, N., & Baago-Rasmussen, L.

The transformative process of the Multi-Country Study on the Drivers of Violence Affecting Children in Italy

Bernacchi, E., & Zelano, M.

Journal Articles and Research Papers

The Risk Factors and Health Consequences of Physical and Emotional Violence against Children in Zimbabwe: A Nationally Representative Survey.

Chigijii, H., Fry, D., Mwadiwa, T. E., Izumi, N., Baago-Rasmussen, L., & Maternowska, M. C. (2018). BMJ Global Health, 3(3): 1-12.

<https://gh.bmj.com/content/bmjgh/3/3/e000533.full.pdf>

Emotional Abuse of Girls in Swaziland: Prevalence, Perpetrators, Risk and Protective Factors and Health Outcomes.

Meinck, F, Fry, D, Ginindza, C, Wazny, K, Elizalde, A, Spreckelsen, T, Maternowska, MC & Dunne, M. (2017). Journal of Global Health. (7)1:1-12.

<http://jogh.org/documents/issue201701/jogh-07-010410.pdf>

Prevalence of Violence in Childhood and Adolescents and the Impact on Educational Outcomes: Evidence from the 2013 Peruvian national survey on social relations

Fry, D. et al. (2016). International Health. 2016 Jan; 8(1):44-52.

www.ncbi.nlm.nih.gov/pubmed/26782352

Research Reports

Italy

Bernacchi, E., Fabris, A. and Zelano, M. (2016). Multi-country Study on the Drivers of Violence Affecting Children. Italian Report. Firenze: Istituto degli Innocenti.

www.istitutodegliinnocenti.it/?q=content/la-violenza-famiglia

Peru

UNICEF Peru and MIMP. (2016). Entender para prevenir. Estudio Multinacional sobre los Determinantes de la Violencia que afecta a los Niños, Niñas y Adolescentes. Resumen Ejecutivo. Lima: UNICEF Peru.

www.unicef.org/peru/spanish/resources_33614.htm

Viet Nam

UNICEF Viet Nam, UNICEF Office of Research – Innocenti, & University of Edinburgh. (2016). Understanding the Drivers of Violence Affecting Children in Viet Nam. Ha Noi: UNICEF Viet Nam.

https://www.unicef-irc.org/files/upload/documents/MCSDV_Viet%20Nam_Understanding%20Drivers%20of%20VAC.PDF

Zimbabwe

Fry, D., Hodzi, C. and T. Nhenga (2016). Addressing Social Norms that Underpin Violence Against Children in Zimbabwe: Findings and Strategic Planning Document. Harare: Ministry of Public Services, Labour and Social Welfare.

www.unicef.org/zimbabwe/FINAL_Social_Norms_strategy_Highres_170214.pdf

Fry, D., Casey, T., Hodzi, C. and T. Nhenga (2016). Exploring Determinants of Violence in Childhood: Methodology of research on Social Norms and Violence Prevention in Zimbabwe. Harare: UNICEF, 2016.

www.unicef.org/zimbabwe/FINAL_methodology_170214_highres.pdf

Fry, D. (2016). Understanding Determinants of Violence in Childhood: A Secondary Analysis of the National Baseline Survey of the Life Experiences of Adolescents in Zimbabwe. Harare: UNICEF.

www.unicef.org/zimbabwe/FINAL_NBSLEA_highres.pdf

Research Resources

Why Do People Do What They Do? A Social Norms Manual for Viet Nam, Indonesia and the Philippines

www.unicef-irc.org/research/pdf/442-EAPROmanual04.pdf

Why do People Do What they Do? A Social Norms Manual for Zimbabwe and Swaziland

www.unicef-irc.org/research/pdf/429-Social-Norms-Manual-ESARO.pdf

Understanding the Drivers of Violence: A Step-by-Step Guide to Conducting Preliminary Research on What Drives Violence

www.unicef-irc.org/research/pdf/440-TOOLKITstep-by-step_28Sept2016_OK.pdf

Book Chapters

Beyond Risk Factors: Structural Drivers of Violence Affecting Children.
Maternowska, M.C., Fry, D., Potts, A., & Casey, T. In Balvin, N., & Christie, D. (Ed.) *Children and Peace: From Research to Action*. Springer Peace Psychology Book Series, in press.

Research to Policy and Practice Process (R3P) National Reports on the Drivers of Violence

Costa Rica

Anglin, J., Beirute, L., Jirón, N. and Peña, G. (2017). Una revisión sistemática de los determinantes de la violencia que afectan a niños, niñas y adolescentes: Costa Rica. San Jose: UNICEF Costa Rica
www.unicef.org/costarica/Innocenti-Violencia-2017.pdf

Philippines

University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation and UNICEF Philippines. (2016). A Systematic Review of the Drivers of Violence Affecting Children in the Philippines. Manila: UNICEF Philippines.
www.unicef.org/philippines/PHL_NBSVAC_LitReview.pdf

University of the Philippines Manila, The University of Edinburgh, Child Protection Network Foundation and UNICEF Philippines. (2016). A Systematic Review of the Drivers of Violence Affecting Children in the Philippines: Executive Summary. Manila: UNICEF Philippines.
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Serbia

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https://www.unicef-irc.org/files/upload/documents/serbia_report.pdf

UNICEF Serbia. (2017). Drivers of Violence affecting Children in Serbia: A Snapshot of Findings.
https://www.unicef-irc.org/files/upload/documents/Serbia_R3P_08082017_FINAL_8pager.pdf

Swaziland

The Swaziland Deputy Prime Minister's Office (DPMO), the University of Edinburgh,, the University of Swaziland and UNICEF Swaziland. (2016). The Drivers of Violence Affecting Children in Swaziland: Synthesis of Findings, Mbabane: UNICEF.
<https://www.unicef-irc.org/files/upload/documents/FINAL%20Web%20Synthesis%20Page%20by%20Page.pdf>

Other reports for Paraguay, Indonesia and Nigeria are forthcoming. Please check <https://www.unicef-irc.org/research/violence-affecting-children/> for updates.

